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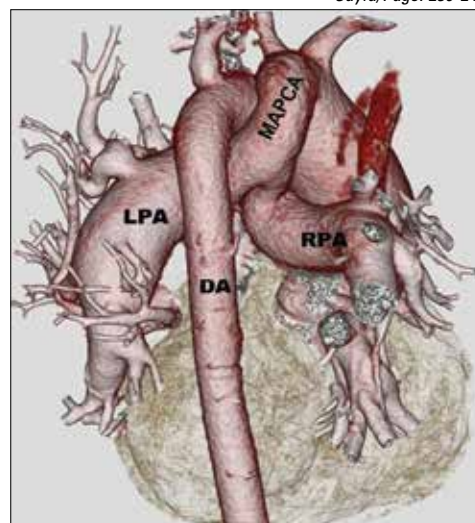
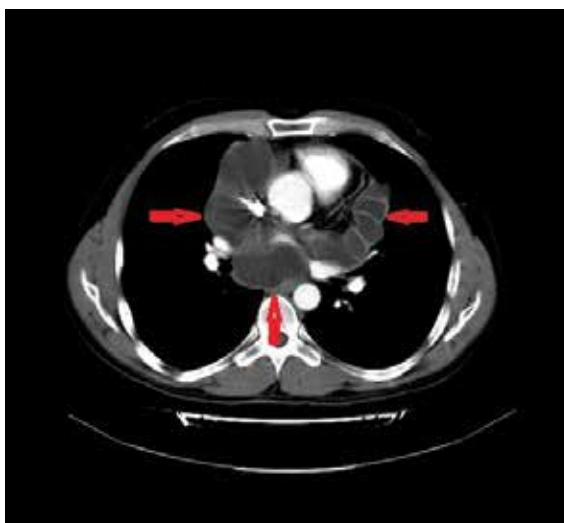
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1.4 Main text includes Introduction, Methods, Results, Discussion, Study Limitations, Conclusions and References sections. It would be useful to present Methods, Results and Discussion parts with subsections and subtitles. Main text should not exceed 5000 words and should be written in Times New Roman 12 font style. Finally, acknowledgement to persons who significantly contributed to the study or assisted in preparing article should be done appropriately. The latter note should be sent by e-mail or uploaded to the system in form of separate "Acknowledgement" Word file.

1.5 Statistical analysis should be performed in accordance with guidelines on reporting statistics in medical journals (Lang T, Altman D. Basic statistical reporting for articles published in clinical medical journals: the SAMPL Guidelines. In: Smart P, Maisonneuve H, Polderman A (eds). Science Editors' Handbook, European Association of Science Editors, 2013). Describe software used for analysis. For parametric tests represent continuous variables as mean-standard deviation, while for nonparametric tests represent data as median and range (minimum- maximum) or median and interquartile range (25th and 75th percentiles). Whenever complex analyses are used support the relative risk, odds or hazard ratios values by providing confidence intervals and p values.

1.6 References are numbered in order of citation in the main text and are typed on separate page in double space fashion. Personal communications, unpublished data, manuscripts under publication processing are cited in the main text in parenthesis, but not in list of references. Those abstracts that had been published more than 2 years ago are not accepted as references.

Publications in kind of abstracts are noted in parenthesis (abstr.). Authors are responsible for accuracy of references.

Periodicals:

Standard journal article: Abbreviations of journal titles should be done in accordance with journal abbreviations used in Index Medicus (for journal abbreviations consult List of Journals indexed for MEDLINE published annually by NLM at <http://www.nlm.nih.gov/tsd/serials/jl.html>). In case of six or less authors numbers list of all authors is required. If number of authors exceeds seven, list first 6 authors followed by et al. A list of authors should be followed by the full title of the article, journal title, year, volume and page numbers.

Example: Muller C, Buttner HJ, Peterson J, Roskomun H. A randomized comparison of clopidogrel and aspirin versus tiopidine and aspirin after placement of coronary artery stents. *Circulation* 2000; 101: 590-3.

Books:

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

Personal author(s): Cohn PF. Silent myocardial ischemia and infarction. 3rd ed. New York: Marcel Dekker; 1993.

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

Conference paper:

Bennigson S, Sotheman BG. Enforcement of data protection, privacy and security in medical informatics. In: Lun K, Depouet P, Plemme TE, Riehoff O, editors. *MEDINFO 92. Proceedings of the 7th 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: HHSIGDE 16920860.

Dissertation:

Kaplan SI. Post-hospital home health care: the elderly access and utilization (dissertation). St. Louis (MO): Washington Univ. 1995.

Article in electronic format:

Morse SS. Factors in the emergence of infectious diseases. *Emerg Infect Dis* (serial online) 1995. Jan-Mar [cited 1996 June 5]; 1(1): (24 screens). Available from: <http://www.cdc.gov/ncidod/EID/cid.htm>.

1.7. Diagrams, Tables and Figures: The figures and pictures should not contain the names of patients, doctors or institutions. Figures and pictures should be sent to the Editor-in-Chief office. They should be printed in separate from main text pages and

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2.1 Unstructured abstract limited to 250 words is required. No more than 6 keywords concordant with NLM MeSH vocabulary terms (available at <http://www.nlm.nih.gov/mesh/MBrowser.html>) must follow the unstructured abstract. Word count is limited by 500 and references number is limited by 50.

3. Editorials: This type of article is a brief evaluation of published manuscripts by editors in the field of investigation other than referees of the journal. At the end of editorial usually a summary on clinical significance of the study is required.

4. Case reports: Interesting from diagnostic and educational point of view case reports concerning seldom, rare seen even by authorities, those one that usually diagnosed and managed with difficulties, and those cases which description is usually missing in clinical practice applications are published. Limited number of case reports is published. Articles accompanied by video/movie images have high priority for publishing. Case reports consist of introduction, case report, discussion and conclusion parts. Reference and word count numbers are limited (no more than 10 and 700 words), and no abstract is required.

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7. Education: Knowledge utilized in clinical applications, included in education curriculum of academic level and confirmed by recent research results should be represented.

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8. Original image: The impressive and rare images reflecting important findings based on clinical science, shedding light on fundamental mechanisms of cardiovascular diseases, emphasizing anomalies, enlightening new treatment methods are accepted for publication. Articles with accompanying video/movie images have high priority for publishing. The article including the title, text and figure legends (without references) should not exceed 250 words. Original images are prepared according with the above-mentioned rules and are published in electronic only version.

9. Historical notes: The articles describing important historical events in cardiology (particularly for Turkey) and relevant disciplines, revealing new information on history of disease's diagnosis and treatment. The new historical findings should be the result of a proper research work on the topic. The content of the historical notes should not contain subheadings and is limited by 900 words. The number of references is limited by 10.

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11. Diagnostic Puzzle: Images which will be of interest for the readers, images of rare cases, obtained from ECG, imaging methods or operation photographs, microscopic-macroscopic anatomic and pathologic findings can be published. Unlike the original images, initial diagnoses of the cases are hidden; and four questions in multiple choice format are prepared. Definite diagnosis-result, explanation and correct answer with instructive images are declared on the ensuing pages of the journal. The Editor-in-Chief can change the format of the question by permission of the authors of original image or case report sent to journal. The authors can send puzzle article in a format not exceeding a total of 500 words, with a maximum of 8 words in the title and up to three references, five images/videos.

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