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1.2 Structured abstract, in Turkish language should not exceed 250 words and consists of the Objective, Methods, Results and Conclusion sections. No more than 6 key words concordant with NLM MeSH vocabulary terms (available at <http://www.nlm.nih.gov/mesh/MBrowser.html>) must follow the structured abstract.

1.3 Structured abstract in English language written due to the above mentioned in part 1.2 rules.

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" WinWord file.

1.5 Statistical analysis should be performed in accordance with guidelines on reporting statistics in medical journals (Altman DG, Gore SM, Gardner MJ, Pocock SJ. Statistical guidelines for contributors to medical journals. *Br Med J* 1983; 7: 1489-93). Describe software used for analysis. For parametric tests represent continuous variables as Means±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 Personal communications, unpublished data, manuscripts under publication processing are cited in the main text in parenthesis, but not in list of references.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/fj.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 doloipogrel and aspirin versus ticlopidine 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 IJ, Redfern SJ, editors. *Mental health care for elderly people*. New York: Churchill Livingstone; 1996.

Conference paper:
Benignsson S, Sotheman BG. Enforcement of data protection, privacy and security in medical informatics. In: Lum KC, Degoulet P, Piemme TE, Rienhoff 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: HHSIGOE 169200860.

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 numbered in order of citation in the text. The comments for tables, diagrams and figures are explained in a separate page with brief title. The sufficiently thick lines could be used while preparing of graphics, thus preventing the losses in the quality of graphics while decreasing their size. The largest appropriate and acceptable size of graphics is 8-9 cm or 16-17 cm in width. Figures should be done professionally and no gray colors be used. Used abbreviations should be explained in alphabetic order in the footnote of the table or figure's legend. Do not use Roman numbers in the numeration of tables and figures within text and their titles. The decimal numbers in the text, tables and figures should be separated by period. Especially, the text of tables should be easily understandable and explanatory and should not repeat the data presented in the main text. The pictures/art works in black and white, grey colors are published without additional costs for authors. The color pictures/art work will be published at additional costs - please contact the Editor-in-Chief office and AVES publishing house.

Note: In addition to printed version of pictures in case reports and original images published in the journal the video/movie images and additional static images are published in the journal's web site www.anakarder.com. The requirements for web site video/movie and static images are:

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The rules for title page, references, figures and tables are applicable for all types of manuscripts.

Special Parts

2. Reviews: are prepared by authors or by invited authors. This manuscript should contain the evaluation, discussion, analysis and synthesis of the newest and updated knowledge on topic, intended to be used in clinic, and should define the perspectives for further research. The author should be an expert and have cited published works in the area of interest.

2.1 Unstructured abstract limited to 250 words is required. No more than 6 key words 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 5000 and references number is limited by 50.

3. Editorials: This type of article is a brief evaluation of published manuscripts by authority 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.

5. Scientific letter: The articles in form of preliminary report aimed to announce the new scientific thoughts and data are accepted for publication as scientific letters. The content of the scientific letter should not contain subheadings and is limited by 900 words. The number of references is limited by 10, and number of figures and tables should not exceed 2.

6. Letter to the Editor: Letter to the Editor is one of the main reasons for publication of this journal. It discusses the importance of the published manuscripts, their missing and deficient sites and usually is limited by 5 references and do not exceed 500 words.

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

7.1 Unstructured abstract limited to 250 words is required. No more than 6 key words 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 5000 and references number is limited by 50.

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.

10. Publication Ethics: The material published in this section of the journal includes articles providing the contemporary information on publication ethics and cases of ethics misconduct. The articles are limited by 900 words and the number of references is limited by 10. You can find COPE charts on publication ethics at: http://www.publicationethics.org/files/u2/All_flowcharts.pdf.

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