

## **International Academy of Clinical and Applied Thrombosis/Hemostasis**

### **INTERNATIONAL ANGIOLOGY: INSTRUCTIONS TO AUTHORS**

The journal **International Angiology** publishes scientific papers on angiology. Manuscripts may be submitted in the form of editorials, original articles, review articles, case reports, therapeutical notes, special articles and letters to the **Editor**.

Manuscripts are expected to comply with the instructions to authors which conform to the **Uniform Requirements for Manuscripts Submitted to Biomedical Editors** by the **International Committee of Medical Journal Editors** ([www.icmje.org](http://www.icmje.org)). Articles not conforming to international standards will not be considered for acceptance.

Papers should be submitted directly to the online

**Editorial Office** at the **Edizioni Minerva Medica** website:

[www.minervamedica.it](http://www.minervamedica.it)

Submission of the manuscript means that the paper is original and has not yet been totally or partially published and, if accepted, will not be published elsewhere either wholly or in part. **All illustrations should be original.** Illustrations taken from other publications must be accompanied by the publisher's permission. **The Authors agree to transfer the ownership of copyright to International Angiology in the event the manuscript is published.** The journal adheres to the principles set forth in the **Helsinki Declaration** and states that all reported research concerning human beings should be conducted in accordance with such principles.

The journal also adheres to the **International Guiding Principles for Biomedical Research Involving Animals** recommended by the **WHO** and requires that all research on animals be conducted in accordance with these principles. **The Authors, if necessary, must indicate that the study has been approved by the ethics committee and that patients have given their informed consent.**

**Authors must also indicate whether they have any financial agreement with any organization that were involved in the research by filling the relevant form.** Papers must be accompanied by the following authors' statement relative to copyright, ethics and conflicts of interest, signed by all authors: "The undersigned authors transfer the ownership of copyright to **International Angiology** should their work be published in this journal.

They state that the article is original, has not been submitted for publication in other journals and has not yet been published either wholly or in part. They state that they are responsible for the research that they have designed and carried out; that they have participated in drafting and revising the manuscript submitted, whose contents they approve. In the case of studies carried out on human beings, the authors confirm that the study was approved by the ethics committee and that the patients gave their informed consent.

They also state that research reported in the paper was undertaken in compliance with the **Helsinki Declaration** and the **International Principles** governing research on animals. They agree to inform **Edizioni Minerva Medica** of any conflict of interest that might arise, particularly any financial agreements they may have with pharmaceutical or biomedical firms whose products are pertinent to the subject matter dealt with in the manuscript.

The authors implicitly agree to their paper being peer-reviewed. All manuscripts will be reviewed by **Editorial Board** members who reserve the right to reject the manuscript without entering the review process in the case that the topic, the format or ethical aspects are inappropriate.

Once accepted, all manuscripts are subjected to copy editing. If modifications to the manuscript are requested, the corrected version should be sent to the online **Editorial Office** with the modified parts underlined and highlighted. The revised version should be accompanied by a letter with point-by-point responses to the reviewers' comments.

Correction of proofs should be limited to a simple check of the printing; any changes to the text will be charged to the authors. Corrected proofs must be sent back within 3 working days to the online **Editorial Office of International Angiology**. In case of delay, the editorial staff of the journal may correct the proofs on the basis of the original manuscript. **Forms** for ordering reprints are sent together with the proofs.

For further information about publication terms please contact the **Editorial Office of International Angiology, Edizioni Minerva Medica, Corso Bramante 83-85, 10126 Torino, Italy – Phone +39-011-678282 – Fax +39-011-674502 – E-mail journals.dept@minervamedica.it.**

### Article types

Instructions for the most frequent types of articles submitted to the journal.

**Editorials.** Commissioned by the **Editor in Chief** or the **Managing Editor**, editorials deal with a subject of topical interest about which the author expresses his/her personal opinion.

No more than 1000 words (3 typed, double-spaced pages) and up to 15 references will be accepted. **Original articles.** These should be original contributions to the subject. The text should be 3000-5500 words (8 to 16 typed, double-spaced pages) not including references, tables, figures. No more than 50 references will be accepted.

The article must be subdivided into the following sections: introduction, materials and methods, results, discussion, conclusions. In the introduction the aim of the study should be clearly summed up.

The materials and methods section should describe in a logical sequence how the study was designed and carried out, how the data were analyzed (what hypothesis was tested,

what type of study was carried out, how randomization was done, how the subjects were recruited and chosen, provide accurate details of the main features of treatment, of the materials used, of drug dosages, of unusual equipments, of the statistical method.).

In the results section the answers to the questions posed in the introduction should be given. The results should be reported fully, clearly and concisely supported, if necessary, by figures, graphs and tables.

The discussion section should sum up the main results, critically analyze the methods used, compare the results obtained with other published data and discuss the implications of the results. The conclusions should briefly sum up the significance of the study and its future implications.

### **Review articles**

Generally commissioned by the Editor in Chief or the Managing Editor, review articles should discuss a topic of current interest, outline current knowledge of the subject, analyze different opinions regarding the problem discussed, be up-to-date on the latest data in the literature.

The text should be 6000-12000 words (17 to 34 typed, double-spaced pages) not including references, tables, figures. No more than 100 references will be accepted.

### **Case reports**

These give a description of particularly interesting cases. The text should be 2000-3000 words (6 to 8 typed, double-spaced pages) not including references, tables, figures. No more than 30 references will be accepted. The article must be subdivided into the following sections: introduction, case report or clinical series, discussion, conclusions.

### **Therapeutical notes**

These are intended for the presentation and assessment of new medical and surgical treatments. The text should be 3000-5500 words (8 to 16 typed, double-spaced pages) not including references, tables, figures. No more than 30 references will be accepted. The article must be subdivided into the following sections: introduction, materials and methods, results, discussion, conclusions.

### **Special articles**

These are articles on the history of medicine, health care delivery, ethics, economic policy and law concerning angiology. The text should be 3000-7000 words (8 to 20 typed, double-spaced pages) not including references, tables, figures. No more than 50 references will be accepted.

## Letters to the Editor

These may refer to articles already published in the journal or to a subject of topical interest that the authors wish to present to readers in a concise form. The text should be 500-1000 words (1 to 3 typed, double-spaced pages) not including references, tables, figures. No more than 5 references will be accepted.

## Guidelines

These are documents drawn up by special committees or authoritative sources. The number of figures and tables should be appropriate for the type and length of the paper.

### Preparation of manuscripts

#### Text file

Manuscripts must be drafted according to the template for each type of paper (editorial, original article, review, case report, therapeutical note, special article, letter to the Editor).

The paper should be type written double spaced with margins of at least 2.5 cm on 212-297 mm format sheets (ISOA4). The format accepted is Word.

The text file must contain title, authors' details, notes, abstract, key words, text, references and titles of tables and figures.

Tables and figures should be submitted as separate files.

### Title and authors' details

- Short title, with no abbreviations.
- First name and surname of the authors.
- Affiliation (section, department and institution) of each author.

### Notes

- Dates of any congress where the paper has already been presented.
- Mention of any funding or research contracts or conflict of interest.
- Acknowledgements.
- Name, address, e-mail of the corresponding author.

### Abstract and key words

Articles should include an abstract of between 200 and 250 words. For original articles and therapeutical notes, the abstract should be structured as follows: aim (aim of the study), methods (experimental design, patients and interventions), results (what was found), conclusion (meaning of the study).

Key words should refer to the terms from Medical Subject Headings (MeSH) of MEDLINE/PubMed. No abstracts are required for editorials or letters to the Editor.

## Text

Identify methodologies, equipment (give name and address of manufacturer in brackets) and procedures in sufficient detail to allow other researchers to reproduce results. Specify well-known methods including statistical procedures; mention and provide a brief description of published methods which are not yet well known; describe new or modified methods at length; justify their use and evaluate their limits.

For each drug generic name, dosage and administration routes should be given. Brand names for drugs should be given in brackets. Units of measurement, symbols and abbreviations must conform to international standards. Measurements of length, height, weight and volume should be given in metric units (meter, kilogram, liter) or their decimal multiples. Temperatures must be expressed in degrees Celsius. Blood pressure must be expressed in millimeters of mercury. All clinical chemistry measurements should be expressed in metric units using the International System of Units (SI).

The use of unusual symbols or abbreviations is strongly discouraged. The first time an abbreviation appears in the text, it should be preceded by the words for which it stands.

## References

It is expected that all cited references will have been read by the authors. The references must contain only the authors cited in the text, be numbered in Arabic numerals and consecutively as they are cited. Bibliographical entries in the text should be quoted using superscripted Arabic numerals. References must be set out in the standard format approved by the International Committee of Medical Journal Editors ([www.icmje.org](http://www.icmje.org)).

## JOURNALS

Each entry must specify the author's surname and initials (list all authors when there are six or fewer; when there are seven or more, list only the first six and then "et al."), the article's original title, the name of the Journal (according to the abbreviations used by MEDLINE/PubMed), the year of publication, the volume number and the number of the first and last pages. When citing references, please follow the rules for international standard punctuation carefully.

### Examples:

#### **- *Standard article.***

Sutherland DE, Simmons RL, Howard RJ. Intracapsular technique of transplant nephrectomy. Surg Gynecol Obstet 1978;146:951-2.

#### **- *Organization as author***

International Committee of Medical Journal Editors. Uniform requirements for manuscripts submitted to biomedical journals. Ann Int Med 1988;108:258-65.

**- Issue with supplement**

Payne DK, Sullivan MD, Massie MJ. Women's psychological reactions to breast cancer. *Semin Oncol* 1996;23(1 Suppl 2):89-97.

**BOOKS AND MONOGRAPHS**

For occasional publications, the names of authors, title, edition, place, publisher and year of publication must be given.

Examples:

**- Books by one or more authors**

Rossi G. *Manual of Otorhinolaryngology*. Turin: Edizioni Minerva Medica; 1987.

**- Chapter from book**

De Meester TR. Gastroesophageal reflux disease. In: Moody FG, Carey LC, Scott Jones R, Ketly KA, Nahrwold DL, Skinner DB, editors. *Surgical treatment of digestive diseases*. Chicago: Year Book Medical Publishers; 1986. p. 132-58.

**- Congress proceedings**

Kimura J, Shibasaki H, editors. *Recent advances in clinical neurophysiology. Proceedings of the 10th International Congress of EMG and Clinical Neurophysiology*; 1995 Oct 15-19; Kyoto, Japan. Amsterdam: Elsevier; 1996.

**ELECTRONIC MATERIAL**

**- Standard journal article on the Internet**

Kaul S, Diamond GA. Good enough: a primer on the analysis and interpretation of noninferiority trials. *Ann Intern Med* [Internet]. 2006 Jul 4 [cited 2007 Jan 4];145(1):62-9. Available from: <http://www.annals.org/cgi/reprint/145/1/62.pdf>

**- Standard citation to a book on CD-ROM or DVD**

Kacmarek RM. *Advanced respiratory care [CD-ROM]*. Version 3.0. Philadelphia: Lippincott Williams & Wilkins; ©2000. 1 CD-ROM: sound, color, 4 3/4 in.

**- Standard citation to a homepage**

AMA: helping doctors help patients [Internet]. Chicago: American Medical Association; ©1995-2007 [cited 2007 Feb 22]. Available from: <http://www.ama-assn.org/>.

Footnotes and endnotes of Word must not be used in the preparation of references.

References first cited in a table or figure legend should be numbered so that they will be in sequence with references cited in the text taking into consideration the point where the table or figure is first mentioned. Therefore, those references should not be listed at the end of the reference section but consecutively as they are cited.

**Titles of tables and figures**

Titles of tables and figures should be included both in the text file and in the file of tables and figures.

***File of tables***

Each table should be submitted as a separate file. **Formats accepted are Excel and Word. Each table must be typed correctly and prepared graphically in keeping with the page layout of the journal, numbered in Roman numerals and accompanied by the relevant title. Notes should be inserted at the foot of the table and not in the title. Tables should be referenced in the text sequentially.**

***File of figures***

Each figure should be submitted as a separate file. **Formats accepted are JPEG, EPS, TIFF and Power Point. Figures should be numbered in Arabic numerals and accompanied by the relevant title. Figures should be referenced in the text sequentially.**

**Reproductions should be limited to the part that is essential to the paper. Histological photographs should always be accompanied by the magnification ratio and the staining method.**

**If figures are in color, it should always be specified whether color or black and white reproduction is required. The cost of color figures will be charged to the Authors.**

**Optimal dimensions for publication of figures in the journal are:**

- 8.6 cm (base) • 4.8 cm (height)
- 8.6 cm (base) • 9 cm (height)
- 17.6 cm (base) • 9 cm (height)
- 17.6 cm (base) • 18.5 cm (height): 1 page.