Late Breaking Abstract Submission Rules and Guidelines

REMINDER: Late Breaking Abstracts must be submitted by Friday, June 1, 11:59 PM CST for consideration.

ABSTRACT CATEGORIES

- Aldosterone Its Receptors and Other Hormones
- Antihypertensive Drugs and Pharmacology
- Blood Pressure Control and Adherence to Treatment
- Blood Pressure Monitoring
- Cardiac Hypertrophy and Dysfunction
- Cerebrovascular Disease and Stroke
- Chronic Kidney Disease Nitric Oxide Endothelin and Other Endothelial Factors
- Clinical Trials in Hypertension and Related Morbidities
- Coronary Artery Disease and Hypertension
- Developmental Programming of Cardiovascular Disease
- Diabetes
- Epidemiology
- Gender Differences and Sex Hormones
- Genetics and Epigenetics
- Hypertension and Aging
- Inflammation Immunity and Cytokines
- Lipid Metabolism
- Neurogenic Mechanisms
- Non-Pharmacological Therapy (Alternative Medicine; Diet; Physical Activity)
- Nutrition and Hypertension
- Obesity Insulin Resistance and Metabolic Syndrome
- Other
- Oxidative Stress
- Patient-Provider-Healthcare System Issues
- Pediatric and Adolescent Hypertension
- Pregnancy and Preeclampsia
- Proteomics and Metabolomics
- Receptors and Signal Transduction
- Renal Hemodynamics & Renovascular Hypertension
- Renal Tubular Transport
- Renin-Angiotensin System
- Salt and Hypertension
- Vascular Biology
- Vascular Remodeling and Dysfunction
- Vascular Stiffness

SUBMISSION GUIDELINES

IMPORTANT: Abstracts must include date (absolute values) in detail sufficient to support conclusions. Abstracts that do not contain data (absolute values) will not be considered for review.

Guidelines for Submission

The body of the abstract must not exceed 1,950 characters (not including spaces). Each graphic counts as 500 characters. Each table counts as 500 characters.

Briefly describe the objectives of the study unless they are contained in the title. Include a brief statement of methods if pertinent. Reminder: Abstracts must include date (absolute values) in detail sufficient to support conclusions. Abstracts that do not contain data (absolute values) will not be considered for review.

Questions? Contact Ashley Clark at ashley.clark@heart.org for questions related to your abstract submission.
Abstracts should not describe research in which the chemical identity or source of the reagent is proprietary or cannot be revealed. Authors should not “split” data to create several abstracts from one. If splitting is judged to have occurred, priority scores of related abstracts will be reduced. Abstracts containing identical or nearly identical data submitted from the same institution and/or individuals will be disqualified.

The following guidelines apply:

- Do not re-enter the abstract title or the authors’ names/institutions.
- Use generic drug names.
- Do not begin sentences with numerals. When percentages are used, the absolute number from which they are derived must be included; for example, “33% (10 of 30)”.
- Standard abbreviations may be used without definition. Nonstandard abbreviations must be kept to a minimum and placed in parentheses after the first use of the abbreviated word or phrase.
- Do not include references, credits, or grant support.
- Do not include names or personal information of any patient participating in the study or trial.
- Proofread abstracts carefully to avoid errors. Abstracts may not be revised after **June 1, 2018**.

**Abstract Acceptance and Presentation**

**Acceptance**

- Abstracts are selected on the basis of scientific merit. Accepted Late Breaking abstract submissions are allocated to poster presentations only.
- This conference is a forum for the presentation of novel research findings. Thus, the work covered by the abstract must not have been published (manuscript) prior to September 6, 2018.
- Notification of abstract acceptance status will be emailed to primary authors in mid-to end of June 2018.

**Embargo Policy**

- Abstracts and presentations are embargoed for release at date and time of presentation or time of AHA news event. Written embargoed information cannot be shared with anyone but one-on-one embargoed media interviews can be conducted as long as the reporter agrees to abide by the embargo policy. Failure to honor embargo policies will result in the abstract being withdrawn and barred from presentation.

**Presentation**

- Submission of an abstract constitutes a commitment by the author(s) to present it if accepted. Failure to present, if not justified, will jeopardize future acceptance of abstracts.
- Guidelines for presentations will be provided to authors of accepted abstracts.
- Late breaking abstracts will be accepted for poster presentation only.
- Expenses (including conference registration fees) associated with the submission and presentation of an abstract are the responsibility of the presenter.
- Recording of sessions by audiotape, video, or still photography requiring flash devices, special lighting, or bulky equipment is prohibited.
- The AHA reserves the right to all video or audio recordings of presentations at Hypertension 2018 Scientific Sessions.

Questions? Contact Ashley Clark at ashley.clark@heart.org for questions related to your abstract submission.