

REVIEWER GUIDELINES

1. In compliance with ACCME requirements, if you are an employee of a Commercial Interest entity, you must decline this invitation. A commercial interest is defined as any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients. For our purposes, an employee is defined as someone who is directly working for the Commercial Interest as their primary employer and the Commercial Interest provides their primary source of income. A person acting as a *contractor* to a Commercial Interest, providing consultation, or other services secondary to their primary appointment at i.e., a University, would **not** be considered an employee.
2. All reviewers shall be bound by the same Conflict of Interest policy (see below).

The American Heart Association, its affiliates and components, and all officers, directors, delegates, council and committee members scrupulously shall avoid any conflict between their own respective personal, professional, or business interests and the interests of the association, in any and all actions taken by them on behalf of the association in their respective capacities.

3. All reviewers must abstain from grading abstracts when there is a real or perceived conflict of interest. If you are an abstract reviewer for the general submission, grading is blinded. If you are a Late-Breaking Clinical Trial reviewer, grading is unblinded. Please note: If an abstract is recognized as from your institution or lab, it is your responsibility to indicate the conflict of interest on the electronic grading site.
4. A reviewer must not participate in the review of an abstract submitted from his or her own organization. The term "own organization" is defined as including any institution in which the individual is an employee, research consultant, officer, director, or trustee, or has a financial interest.
5. Abstracts and materials for review are strictly confidential. Scores and scientific content cannot be copied, given to, communicated to, or discussed with colleagues or the individual(s) submitting abstracts, or used in any other way.

SCORING CRITERIA

Abstracts submitted for consideration must be an original idea, concept, or an improvement or revision of an old idea. Abstracts will not be considered if previously presented and/or published as a manuscript or abstract at any national or international meeting or world congress prior to the date and time of the meeting. Abstracts assigned to reviewers are in final format. No changes to content will be made after the submission deadline. Abstracts may not represent a work in progress. Scoring criteria for abstract acceptance/non-acceptance are as follows:

- A. **Scientific Merit** - direction toward the development of a new or improved diagnostic procedure or idea.
- B. **Organization** - well organized, easy to follow and understand.
- C. **Practicality** - should be available, logical, and feasible.
- D. **Presentation** - should be clear, brief, show understanding of the subject matter.
- E. **Technical quality** - the idea must stand up to scrutiny. Facts and data have scientific backing.

Refer to the scoring scale and description for each score below:

SCORE	DESCRIPTION
10	Outstanding – Exceptional investigation; clearly of very high quality.
9	Excellent – Investigation based on original concepts and provides important data or new techniques.
8	Very Good – Similar to above but less outstanding.
7	Good – Reasonable quality, but some limitations.
6, 5	Average – Contains adequate data and information.
4, 3, 2	Below Average – Repetitious investigation that does not add to existing knowledge; poor data.
1	Reject - Will not be accepted.
	Conflict of Interest - All reviewers must abstain from grading abstracts when there is a real or perceived conflict of interest. Grading is blinded; however, if an abstract is recognized as being from your institution or lab, it is your responsibility to indicate the conflict of interest on the electronic grading site. (Select “Conflict of Interest” in the Score drop-down box.)
	Not Qualified - If you do not feel qualified to grade an abstract, you may select "Not Qualified" in the score choices. Please do not ask a colleague to grade it for you. NOTE: Use this option for abstracts you feel were submitted to the wrong category.

Newsorthy Abstracts

If you review an abstract you think is newsworthy, please check the box next to “newsworthy” under the Score drop-down box. A newsworthy abstract is one that is scientifically valid, clinically significant or breakthrough science that is of interest to the public or professional audience.

- Is it new information?
- Is it intriguing to the public (i.e., mummies had heart disease)?
- Is it a scientific breakthrough - even at the animal stage?
- Is it long-awaited or much-anticipated?
- Will it change the way patients are treated?

Helpful Hint: When reviewing submissions with graphic(s), if you cannot see the graphic clearly on the screen, click it to open a larger version of the graphic in a new window.

Standard Options (Online)	Offline Options
<ul style="list-style-type: none"> • To view and score abstracts one at a time Click on Review Abstracts • To sort and view all titles assigned to you Click on Edit/View Scores 	<ul style="list-style-type: none"> • To print and review abstracts offline Click BulkView/Print Abstracts • To view and score ten abstracts in a single screen Click QuickScore Abstracts

Technical Support If you have any questions concerning the online review system, please contact the [OASIS Helpdesk](#) or 217-398-1792 between 9:00 a.m. and 5:00 p.m. Central Time, Monday through Friday. Policy questions may be directed to AHA by email: program.participant@heart.org