

Rules and Guidelines for Abstract Submission Submission Deadline: Wednesday, March 16, 2022 (6:00 PM Central Standard Time - UTC-5 Hours)

To ensure that your abstract receives proper scientific consideration, be sure to submit to the appropriate <u>category</u>. To submit your abstract, visit the <u>conference website</u>. Please note that you will be charged a processing fee of US \$49 for each abstract you submit. The abstract submission fee covers administration and online costs associated with the submission, grading, notification, and slotting processes as is therefore nonrefundable.

Abstract Submission

- Review Best Practices for Writing Abstracts
- Submit all abstracts in English.
- An abstract must have a short, specific title (containing no abbreviations) that indicates the nature of the investigation.
- Describe briefly, the objectives of the study unless they are contained in the title. Include a brief statement of methods if pertinent. State findings in detail and sufficient to support conclusions. Abstracts should not describe research in which the chemical identity or source of the reagent is proprietary or cannot be revealed.
- When submitting your abstract, please consider indicating what impact your findings might have on patients or clinical practice in the future, if appropriate, and/or if this is the first study of its kind. This information may be useful for American Heart Association communications staff when evaluating abstracts for potential news coverage.
- Use generic drug names.
- 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.
- Do not re-enter the abstract title or the authors' names/institutions.
- Do not begin sentences with numerals.
- 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. The abstract will be reviewed exactly as submitted and may not be revised after 6:00 pm CDT, March 16, 2022.
- The body of the abstract must not exceed 1,950 characters (not including spaces). Addition of a table or a graphic deducts 500 characters.

Acceptance

- Notification of abstract acceptance status will be emailed to primary authors in early April.
- Abstracts are reviewed in blinded fashion and selected on the basis of scientific merit. The conference Program Committees will determine whether the abstract is to be presented orally or by poster.
- Request oral or poster presentation on the presentation preference tab of the submitter site. The selection of one of these options will neither prejudice acceptance nor guarantee an oral or poster presentation because abstracts will be arranged to fit into a thematic group for presentation. Although every effort will be made to accommodate your presentation request, there is no guarantee that you will present in the mode of your preference.
- 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.
- Expenses (including conference registration fees, airfare, lodging, etc.) associated with the submission and presentation of an abstract are the responsibility of the presenter.
- Accepted abstracts will not have been published (manuscript or abstract) prior to the date and time of presentation or presented at any national or international meeting, prior to July 25, 2022. Exception: if early career investigators feel compelled to increase their opportunity of scientific interaction, then the abstract submission must have incremental information from the abstract presented elsewhere to justify submission and presentation at the AHA, should the investigator's work be accepted at both meetings. Each investigator will determine, in good conscience, what constitutes incremental information and should notify AHA staff.
- Abstracts are embargoed for release at date and time of presentation or time of AHA news event. Information may not be released before then. Failure to honor embargo policies will result in the abstract being withdrawn and barred from 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 for the American Heart Association.
- There is no limit to the number of abstracts an investigator may submit. If selected, the presenter must be one of the co-authors listed.

• Abstracts accepted for presentation at the conference will be published online only as a supplement to the AHA journal *Circulation Research*.

Presentation

- All presentations and question-and-answer sessions will be conducted in English. Presenters may request assistance from the moderator who will repeat or rephrase questions from the audience or may ask a colleague in the audience to assist with translation.
- References to work previously published by other authors must include citations at the bottom of the appropriate slides.
- Unauthorized recording of the conference is prohibited, whether by video, still or digital photography, audio or any other recording or reproduction mechanism. This includes recording of presentations and supporting AV materials and of poster presentations and supporting poster materials.

Abstracts Copyright Transfer Agreement

During the abstract submission process, you will have the opportunity to provide your approval (electronically) of the copyright transfer agreement. Your approval of this agreement indicates:

- The author(s) hereby assigns, conveys, and otherwise transfers all rights, title, interest, and copyright ownership in said work to the AHA/ASA effective upon acceptance of said work for presentation. "Work" includes the material submitted for presentation and any other related material submitted to the AHA/ASA.
- The assignment of rights, title, interest, and copyright ownership in the Work to the AHA includes, but is not expressly limited to, rights to edit, publish, reproduce, distribute copies, prepare derivate works, include in indexes or search databases in print, electronic, on the Internet, or in any other media, whether or not created or in use at the time of execution of this agreement, and claim copyright in said work throughout the world for the full duration of the copyright and any renewals or extensions thereof. If this is a jointly created Work, all co-authors correspondingly assign all rights, title and interest in said Work to the AHA by the execution of this Agreement.
- If the AHA does not present or publish said Work, Author(s) will be so notified, and all rights assigned hereunder will revert to the Author(s).

The assignment of rights hereunder does not extend to the full-length article on which the abstract is based.

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- Author(s) hereby represents and warrants that he/she/they is/are sole author(s) of the work, that all authors have participated in and agree with the content and

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- For U.S. Government Employee Author(s): The author(s) hereby warrants that the above-described work was authored by employees of the United States government as part of their official duties and therefore may be published and reproduced without restriction.

Questions

Contact the AHA Manager, Viola Gold <u>viola.gold@heart.org</u> for questions related to your abstract submission. We look forward to seeing you in Chicago.