Editorial Scope

EuroIntervention Journal is an international, English language, peer-reviewed journal whose aim is to create a forum for high quality research and education in the field of percutaneous and surgical cardiovascular interventions. EuroIntervention is the official journal of EuroPCR and the European Association of Percutaneous Cardiovascular Interventions (EAPCI). It is released monthly in paper and electronic formats together with annual supplements. EuroIntervention is indexed in Science Citation Index® (ISI), SciVerse Scopus, MEDLINE®/PubMed.

Online submission

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Contact

Submission enquiries should be directed to eurointervention@eurointervention.org
General guidelines for manuscript preparation

Please read the instructions below carefully. Manuscripts that do not adhere to the submission guidelines will be returned to the authors.

ETHICAL GUIDELINES
The authors are responsible for the contents of the manuscript. All of the authors must have read and approved the manuscript. Studies involving experimental animals and humans must conform to the guiding principles of the Declaration of Helsinki.
Studies must have been approved by the Institutional Committee on Human Research at the author’s institution and human subjects must have given informed consent for participation in the study.

Cover letter
Manuscripts must be accompanied by a cover letter. This letter should:
(1) specify concisely the significance of the paper, the novelty and the message, the relation to daily practice and the incremental value compared with existing literature;
(2) declare that the paper is not under consideration elsewhere;
(3) declare that none of the paper’s contents have been published previously;
(4) declare that all authors have read and approved the manuscript;
(5) make full disclosure of any potential conflict of interest for each and everyone of the listed authors;
(6) designate one corresponding author;
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If your manuscript has not been formally reviewed by EHJ, please mention it in your cover letter and on the submission website.
A list of suggested objective reviewers may also be provided.

General format
Prepare your manuscript text using a Word processing package (save as .doc / .docx). Submissions in PDF form are not permitted. Oxford (UK) English style and spelling should be used. Manuscripts should be double-spaced, including text, tables, legends and references. The number of tables, figures and references should be appropriate for the manuscript content. Tables must also be submitted in Word form, JPEG are not acceptable (see below). Please be aware that if you exceed the recommended word count the Editors reserve the right to decline the manuscript for peer review.
Title page
The title page should include the following:
(1) The title.
(2) The name(s) of the author(s) (including full first name and middle initial). Up to 12 co-authors will be accepted.
(3) The authors' academic qualifications (e.g., MD, PhD, etc.).
(4) Department(s) and institution(s) to which the authors are affiliated. List the current affiliations of all authors and link the authors’ names and affiliations by “1”,”2”, “3”, etc., after each author’s name, before the degree(s)/qualification(s) and before the list of affiliations.
(5) Short running title (no more than 50 characters including spaces).
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Examples of possible conflicts are: consultancies, corporate appointment, stock ownership or other equity interest or patent-licensing arrangements, etc. If none of the authors has a conflict of interest, please state clearly that there are no conflicts of interest, using the wording “The authors have no conflicts of interest to declare.”
(8) Total word count - the total word count of the manuscript (including Title Page, Abstract, Text, References, Tables and Figures Legends)

Abstract
Abstracts may not contain more than 200 words. The abstract must be formatted with the following headings: (1) Aims, (2) Methods and results, (3) Conclusions.

Keywords
A maximum of six keywords may be submitted.

Abbreviations
All abbreviations and acronyms should be expanded upon first use in the text, and thereafter the abbreviation/acronym should be used.

Condensed abstract
Condensed abstracts may not contain more than 100 words.

Tables
Tables must be submitted in a WORD document format only. Do not use images for tables (for example: JPEGs, screenshots and other images will not be accepted). Tables must have the table number and title clearly indicated. Tables must be cited in numerical order in the text. All abbreviations used within the tables must be listed in alphabetical order in a footnote appearing beneath the table. Tables must be numbered using Arabic numerals both within the text and in the accompanying captions. Label tables carefully when submitting.
Figures, line drawings and graphs
The number of submitted figures should be appropriate to avoid redundancy and promote clarity. Figures must be saved in JPEG or TIFF format at a resolution of at least 300 dpi (dots per inch). The size of each image must preferably be a minimum of 8 cm x 8 cm. This size is equivalent to one column width of printed text. Label figures carefully when submitting.
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Acknowledgements
The contributions of individuals whom the authors would like to acknowledge should be listed in the Acknowledgements section above the Funding and/or Conflict of interest statement.

Funding
All sources of funding should be acknowledged in this section.

Impact on daily practice
In no more than 3 sentences (i.e., 125 words=900 characters with spaces), please explain the clinical significance of your article, underlining the “take-home” message that you believe a reader should retain for their daily practice.
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If none of the authors has a conflict of interest, please state clearly that there are no conflicts of interest, using the wording “The authors have no conflicts of interest to declare.”

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References in the main body of the article/text must be cited using Arabic numerals in brackets and numbered in the order cited. These should be placed before, not after, sentence punctuation. References in an Online supplement must be numbered consecutively to the references in the print paper. Example: If you have 10 references in the main part of the manuscript, then the references in the Online data supplement would start with number 11.

The following will not be accepted as references:

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References listed at the end of the article/text must appear in the following format:

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Format: #. Author of article AA, Author of article BB, Author of article CC. Title of article. Abbreviated title of journal in italics. Year;vol:page number(s).


Please note:

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The following information should be noted for these categories:

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Submitted manuscripts must not exceed 5,000 words, including abstract, references, figure legends and tables. If the authors exceed the word count, the Editors will not consider the manuscript for peer review. These papers should be divided into the following sections:

1. Title page
2. Abstract
3. Keywords
4. Condensed abstract
5. Abbreviations
6. Introduction
7. Methods
8. Results
9. Discussion
10. Impact on daily practice
11. Acknowledgements, if appropriate
12. Funding
13. Conflict of interest statement
14. References
15. Figure legends
16. Appendices, if applicable
17. Tables in text form
18. Figures
19. Online data supplement legends, if applicable.

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All editorials should be limited to 1,500 words (including references, figure legends and tables), with a maximum of 10 references. Strongly recommended, an Editorial is accompanied by an original figure or a table. Generally an Editorial is on an “invitation only” basis.

**LETTERS TO THE EDITOR**

Letters to the Editor should be submitted within the 8 weeks following publication of the article in the Journal. The letter should not exceed 500 words and the Editors will solicit a reply from the authors of the article. Letters and their responses will be published online only. They should have no tables or figures, and no original data may be included. Please note that the prerogative remains with the Editors to accept or decline the letter for publication.

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Generally a special report is on an “invitation only” basis. However, incidental special reports are welcome. A special report is a paper based on a new technology applied in patient treatment and therefore is considered as the reporting of a “First-In-Man” case. The special report is published in the print and electronic versions of EuroIntervention and should always contain accompanying moving images for the online publication of the paper. Special reports should not exceed 1,500 words (including references [5 references maximum], figure legends and tables). If the authors exceed the word count, the Editors will not consider the manuscript for peer review.
NEW INNOVATION
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TOOLS AND TECHNIQUES
This is a series of educational articles, in line with conventional European practice, covering basic and advanced interventional and diagnostic techniques. The series is allied to the educational arm of EuroPCR and will have interactive, online learning and communication content. The chapters are written with the intention of providing a clear practical, step-by-step teaching source and reference for cardiovascular intervention. The emphasis is very much on a practical approach and the complete work will encompass all the major cardiovascular procedures: coronary and peripheral intervention, structural heart disease and invasive imaging. Generally a Tools and Techniques Clinical or Tools and Techniques Statistics article is published on an “invitation only” basis.

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This category is reserved for exceptional high-quality images. The high-resolution image must be submitted with no more than a 250-word description, including the figure title and legend. References will not be accepted. Authors are encouraged to submit moving images to accompany the figure for the online version. If the authors exceed the word count, the Editors will not consider the manuscript for peer review.
HOW SHOULD I TREAT?

This type of article contains three parts:

Part 1 - How should I treat? Authors present a challenging case without discussing the different potential clinical management plans.

Part 2 - How would I treat? Guest experts will be invited by the Editor to share their opinions regarding their preferred treatment plan.

Part 3 - How did I treat? The submitting authors will present the actual treatment.

The rules of this type of article:
The guest experts will be blinded to the actual treatment and the submitting authors will be blinded to the experts’ opinions.

INSTRUCTIONS FOR AUTHORS PRESENTING THE CASE

Part 1 - How should I treat?
1. Title: Should always include the prefix: “How should I treat?”
   Example: How should I treat an unusual referral for heart transplantation?

2. Title page
   (see all required fields for the Title page on page 2 of this PDF)

3. Presentation of the case
   The presentation of the case must not exceed 1,000 words, including references and figure legends. The presentation should conclude with your treatment dilemma and may be formulated as a question.

Part 3 - How did I treat?
1. The Title of this part should be “How did I treat? Actual treatment and management of the case”.

2. The presentation of the treatment of the case must not exceed 1,000 words, including references and figure and moving image legends. Please note that the Editorial Board actively encourages the submission of moving images for the website publication.

INSTRUCTIONS FOR THE INVITED GUEST EXPERTS

Part 2 - The invited experts’ opinion
1. Title. The title of this section will be “How would I treat? The Invited Experts’ Opinion”.

2. Title page. The title page should include the following:
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   (5) Short running title (no more than 50 characters including spaces).
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Examples of possible conflicts are: consultancies, corporate appointment, stock ownership or other equity interest or patent-licensing arrangements, etc…

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3. **References**, if applicable.

4. **Figures** and **Figure legends**, if applicable.