INFORMATION FOR AUTHORS (Published in the January and July issues)

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1. General Description of Content

- The Annals of Thoracic Surgery publishes original articles on topics in thoracic and cardiovascular surgery and features such as case reports, “how to do it” articles, image reports, new technology evaluations, STS workforce reports, guidelines, review articles, articles on our surgical heritage, special reports, book reviews, invited editorials, correspondence, commentary and our Continuing Medical Education (CME) activities each month. The electronic issue of the journal posted at www.annalsthoracicardsurgery.org is the journal of record.

2. Mechanics of Submitting a Manuscript

- All manuscripts, correspondence, and editorial material must be submitted to the online editorial office at http://www.atseditorialoffice.org. Authors must register with an e-mail address and password to submit manuscripts online. Unregistered authors can “create a new account” (i.e., register) by following the instructions at the editorial office website. The registration process requires registrants to create a password which is used thereafter to access the website.

- Every submission, regardless of category, must include: a cover letter, indicating the category of article (see below); the complete manuscript, including title page, abstract, text, tables, acknowledgments, required disclosures (see below), references and illustrations. All of this material is entered via the editorial office website, http://www.atseditorialoffice.org.

- A “Conditions for Publication Form,” which includes disclosures of individual conflicts of interest; sources of funding; scientific responsibility; and freedom of investigation, must be signed by all authors. A copy of this form follows "Information for Authors.”

- Written permission from the publisher (copyright holder) is required to reproduce any previously published table(s), illustration(s) or photograph(s) in both print and electronic media. Written permission from unmasked patients appearing in photographs is also required.

- The signed "Conditions for Publication Form," permission letters, and other supplemental material (but not cover letter) should be sent by surface mail or fax to the editorial office at the address above.

3. General Information for Formatting Manuscripts

- Submit manuscripts, prepared in Microsoft Word, through the editorial office website after signing in or creating a new account. Enter the “Author Area” and follow the instructions for submitting “Entry data,” a cover letter, a complete manuscript file, including abstract and tables, if any, and figure files, if any. Each figure needs to be uploaded according to the specifications in "Figures and Illustrations.” (Section 5) as an image file, separate by line from the manuscript file. The system will generate a single PDF for review purposes that includes your manuscript file and any image files. Please see “Order of Content Within Manuscripts” (Section 4) for all of the elements to be included in the manuscript you submit for review.

- In addition to the uploading of your manuscript file and any image files, separate entry of some metadata (defined as the manuscript title, author names, abstract, etc.) is required during the online submission process. Thus, be sure to enter the metadata where asked, but also to include this information within your manuscript file as well.

- Under “Entry data,” indicate the number of authors in the box and justify more than 10 authors.

- Arrange manuscript as follows: (1) title page, (2) abstract, (3) text, (4) acknowledgments, (5) disclosures if required, (6) references (do not use EndNotes), (7) tables and (8) figure legends. Number pages consecutively, beginning with the title page as page 1 and ending with the page of figure legends. Do not number manuscript lines. Do not embed tables in the text.

- Manuscripts should be typed double-spaced throughout (including title page, abstract, text, references, tables, and legends) with one (1) inch (2.5 cm) margins all around.

- Microsoft Word is the preferred software program. Manuscripts written in 11 point Arial or Times New Roman fonts are preferred and more reliably convert to PDF files during electronic submission. (Note: Do not submit your manuscript in PDF format, which cannot be processed by the editorial office online manuscript tracking system.)

- American rather than British spelling should be used throughout the manuscript, including that within illustrations.

4. Categories of Manuscripts and Word Limits

- Original articles should not exceed 4500 words, which includes all words and number sequences submitted regardless of location within the manuscript. The counted words include title page, abstract, text, acknowledgments, disclosures, tables, figure legends and references. The number of references should not exceed 40. All words and number sequences that will appear in the printed article are included in the word count.

- New Technology articles are limited to 2500 words including title page, abstract, text, acknowledgments, disclosures, tables, figure legends and references. The number of tables should not exceed three; the number of illustrations should not exceed six if tables are included; eight, if there are no tables. The number of references should not exceed 10. All New Technology papers require an Acknowledgment, which discloses funding sources and includes a freedom of investigation statement.

- Case reports and “how to do it” articles are limited to a total of 1500 words including title page, abstract, text, acknowledgments, disclosures, figure legends and references. These reports should not include tables; if essential a table should be justified in the cover letter and not have more than four columns and eight rows. The word count of the table is included in the 1500 word limit. Case reports should not be combined with “reviews of the literature.” References are limited to eight. A “how to do it” article should be a description of a useful surgical technique and contain descriptive, illustrative material describing the innovation. Images in cardiothoracic surgery are limited to 300 words including title page, text and references, and to two, possibly three, figures. The entire contribution must fit on one printed page of The Annals.

- Guidelines, Consensus Documents and Reviews Guidelines are usually, but not exclusively developed by the Workforce on Evidence Based Surgery. Guidelines, but not consensus documents or reviews, will have an Executive...
Summary that includes “levels of evidence” for recommendations after the list of author names in lieu of an abstract. The Executive Summary may be up to 1000 words (which are included in the word count limit). The total word limit for guidelines is 6500 words and the number of references should not exceed 80. Peer review is at the discretion of the editor. The final document must be endorsed by the STS Board of Directors, which will appear as a footnote on the first page. Correspondence documents originate from one or more self-appointed experts and require commercial funding to cover page costs. These documents do not require prior approval of the STS, but are peer reviewed. The format of the article or articles is that of a review article. Word limits are negotiable. Reviews originate with authors and are peer reviewed. The total word limit is 6500 words and the number of references should not exceed 80. The unstructured abstract is limited to 100 words (which are included in the word limit). Reviews must have a “Methods” section that describes the sources (databases, prior publications, etc.) that were searched. Topics should be reasonably broad (as opposed to rare diseases) and preferably ones about which there is doubt or controversy regarding management. Authors should seek to integrate data learned from the review and not merely provide one line precis of prior publications.

Surgical Heritage articles are limited to 4500 words and describe breakthrough achievements which created and developed a new surgical therapy or thoracic disease. The any articles may or may not include biographical precis of the architects of the achievement. The category is designed to interest our entire readership and therefore does not include tributes; anecdotes of isolated procedures which were not further developed; or vignettes of interesting history or discovery. Memorials are limited to past presidents of the STS and are published as Surgical Heritage articles. Memorials are limited to 2500 words and two photographs. Authors are chosen by the STS Board of Directors. Authors are asked to include contributions to the STS of the deceased during his or her ascent to office as well as achievements during and after leaving the presidency.

Correspondence (Letters to the Editor) and articles, which follows the published in reviews must have a “Methods” section that describes the sources (databases, prior publications, etc.) that were searched. Topics should be reasonably broad (as opposed to rare diseases) and preferably ones about which there is doubt or controversy regarding management. Authors should seek to integrate data learned from the review and not merely provide one line precis of prior publications. Correspondence should be given in standard editorials. Correspondence articles, which follows the published in reviews must have a “Methods” section that describes the sources (databases, prior publications, etc.) that were searched. Topics should be reasonably broad (as opposed to rare diseases) and preferably ones about which there is doubt or controversy regarding management. Authors should seek to integrate data learned from the review and not merely provide one line precis of prior publications. Correspondence articles, which follows the published in reviews must have a “Methods” section that describes the sources (databases, prior publications, etc.) that were searched. Topics should be reasonably broad (as opposed to rare diseases) and preferably ones about which there is doubt or controversy regarding management. Authors should seek to integrate data learned from the review and not merely provide one line precis of prior publications. Correspondence articles, which follows the published in reviews must have a “Methods” section that describes the sources (databases, prior publications, etc.) that were searched. Topics should be reasonably broad (as opposed to rare diseases) and preferably ones about which there is doubt or controversy regarding management. Authors should seek to integrate data learned from the review and not merely provide one line precis of prior publications. Correspondence articles, which follows the published in reviews must have a “Methods” section that describes the sources (databases, prior publications, etc.) that were searched. Topics should be reasonably broad (as opposed to rare diseases) and preferably ones about which there is doubt or controversy regarding management. Authors should seek to integrate data learned from the review and not merely provide one line precis of prior publications. Correspondence articles, which follows the published in reviews must have a “Methods” section that describes the sources (databases, prior publications, etc.) that were searched. Topics should be reasonably broad (as opposed to rare diseases) and preferably ones about which there is doubt or controversy regarding management. Authors should seek to integrate data learned from the review and not merely provide one line precis of prior publications.
Journal references should provide inclusive page numbers; book references should cite specific page numbers. Authors are solely responsible for accuracy, completeness and non-duplication of references and for the correct spelling of names of all authors. Journal abbreviations should conform to those used in *Index Medicus*. The style and punctuation of the references should follow the formats outlined in the examples below:

**Journal Article**


(List all authors if 6 or fewer; otherwise list first 3 and add “et al.”)

**Chapter in Book**


**Internet Address**


- **Tables**
  - Tables should be typewritten double-spaced on separate sheets (one to each page). Do not use vertical lines. Each table should be numbered (Arabic) and have a title above. Legends and explanatory notes should be placed below the table. Abbreviations used in the table follow the legend in alphabetical order. Lower case letter superscripts beginning with *a* and following in alphabetical order are used for notations regarding statistics. Exact *P* values must be used. "NS" is obsolete.
  - Tables should be self-explanatory, and tabulated data should not be duplicated in the text or illustrations. *Tables must be submitted as part of the text file and not as illustrations.*
- **Figure Legends**
  - Figure legends should be numbered (Arabic) and typed double-spaced in order of appearance beginning on a separate sheet. Identify (in alphabetical order) all abbreviations appearing in the illustrations at the end of each legend. Give the type of stain and magnification power for all photomicrographs.
  - Cite the source of previously published (print or electronic) material in the legend and indicate permission to republish has been obtained. Proof of permission must be surface mailed or faxed to the editorial office once the manuscript is submitted online.
- **Illustrations**
  - Images or figures are submitted online as one or more separate files that may contain one or more images. Within each file containing images, use the figure number (eg, Figure 1A) as the image filename. The system accepts image files formatted in TIF, PNG and EPS. Powerpoint (.ppt) files are also accepted, but you must use a separate Powerpoint image file for each Powerpoint figure. Please obtain technical help if you are unfamiliar with image files. Call The Annals editorial office (215-349-5542) during business hours 9 AM–5 PM, Eastern time U.S., Monday through Friday, if you cannot obtain technical help.
  - Illustrations may not be separately copyrighted or have a copyright logo. Illustrations may have a discrete signature of the artist if permitted by the payer of the illustrative work. As a condition for publication copyright for all art is ceded to The Society of Thoracic Surgeons.
  - Symbols, letters, numbers and contrasting fills must be distinct, easily distinguished and clearly legible when the illustration is reduced in size. Most illustrations will be reproduced at a width of one column (8.25 cm; 3–1/4 inches).
  - Black, white and widely crosshatched bars are preferable; do not use stippling, gray fill or thin lines.
  - Written permission for publication from unmasked patients appearing in photographs must be obtained by the authors and must be surface mailed or faxed to the editorial office once the manuscript is submitted online.
  - Color illustrations. Color illustrations no longer incur a color surcharge and are usually preferable over black and white illustrations. All photomicrographs must be submitted in color.
  - Original illustrations. If your manuscript is accepted for publication and the electronic art you have submitted online is not acceptable for reproduction purposes, you may be required to send a set of original illustrations to the editorial office. You will be instructed accordingly by the staff. These illustrations will not be returned.

6. **Protection of Human and Animal Subjects**

- **Human Investigation**
  - Institutional Review Board (IRB) or Ethics Committee (EC) or comparable group must approve all articles that contain information about human subjects. The local IRB also decides whether or not patient consent is required or waived. The IRB or EC, not the author, makes review decisions for every study involving human subjects or information about human subjects. The investigator should retain and not submit the decision letter granting IRB approval. Study approval and patient consent or waiver of the need for consent must be stated in the first paragraph under “Patients and Methods.”

- **Animal Care**
  - When animals are used as subjects, institutional approval of the protocol is necessary and authors should include a statement in “Methods” indicating that investigators complied with the 1996 “Guide for the Care and Use of Laboratory Animals” (See [http://www.nap.edu/readingroom/books/labrats/contents.html](http://www.nap.edu/readingroom/books/labrats/contents.html)), recommended by the U.S. National Institutes of Health, or with equivalent guidelines administered by the author’s governmental regulatory body. When no formal ethics review process is available, authors must state that humane care was provided in animal experiments, in accordance with either of the above guidelines.

7. **Conditions for Publication Form**

- **The Society of Thoracic Surgeons and The Annals** require all authors to adhere to the highest ethical standards of our profession. Ethical breaches include scientific misconduct (falsification or fabrication), plagiarism and redundant publication and are described more fully in *Ann Thorac Surg* 1999;68:1; *Ann Thorac Surg* 2007;84:717–9; and *Ann Thorac Surg* 2012;93:1.

- Before publication of an accepted manuscript each author is required to certify by signing the “Conditions for Publication Form” that he or she has participated sufficiently in the work to take responsibility for a meaningful share of the content of the manuscript as described more specifically in the preamble of the form. The “Conditions for Publication Form” also covers: conflicts of interest, freedom of investigation, exclusive publication, undisclosed authorship, and copyright transfer.

8. **Miscellaneous**

- **NIH Initiative**
  - The United States National Institutes of Health requires that all investigators funded by the NIH submit or have submitted for them an electronic version of their final, peer-reviewed manuscripts upon acceptance for publication. The electronic manuscript is sent to the National Library of Medicine’s PubMed Central ([http://www.ncbi.nlm.nih.gov/pmc](http://www.ncbi.nlm.nih.gov/pmc)), where it is made publicly available no later than 12 months after the official date of publication ([http://publicaccess.nih.gov](http://publicaccess.nih.gov)).

- **Randomized Controlled Trials**
  - The *Annals of Thoracic Surgery* endorses the CONSORT Statement regarding randomized controlled trials ([http://www.consort-statement.org](http://www.consort-statement.org)) and recommends that investigators who plan to publish their work in *The Annals* review the CONSORT E-Flowchart and Checklist (available at [http://www.consort-statement.org/consort-statement/exercudl/](http://www.consort-statement.org/consort-statement/exercudl/)) before enrollment of subjects begins. Randomized controlled trials should be free of bias and of misleading information due to, for example, insufficient numbers of subjects and failure to define primary and secondary endpoints. The Checklist succinctly and comprehensively defines the attributes of a well-designed and reported randomized controlled trial. Authors who submit reports of randomized controlled trials to *The Annals* should also submit a completed CONSORT Flowchart and Checklist, leaving blank the page number of any item that wasn’t done as part of the study; no
study is expected to have addressed all the items on the checklist. These documents are intended to be used for review purposes only, and will not be published.

- **Registration of Clinical Trials**
  The *Annals of Thoracic Surgery* supports mandatory registration of all publicly or commercially funded clinical trials, including Phase I and II trials, as a condition for publication. Information regarding requirements for registration of a clinical trial may be found at [http://www.icmje.org/#clin_trials](http://www.icmje.org/#clin_trials). Information for registering a clinical trial is available at [http://clinicaltrials.gov](http://clinicaltrials.gov). The trial registration number should appear at the end of the abstract.

- **Archiving Submissions in Editorial Office Online Manuscript Tracking System**
  The editorial office will delete unpublished manuscripts from the online system 6 months after the final decision is rendered. Manuscripts of published articles will be deleted 12 months after acceptance.

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**Required supplementary data to be surface mailed or faxed to the editorial office:**

- The “Conditions for Publication Form” signed by all authors with appropriate boxes checked.
- Written permission from the publisher to reproduce previously published illustrations or tables.
- Written permission from unmasked patients appearing in photographs.