

ABSTRACT SUBMISSION GUIDELINES

1. General Information

- Submission is only available online at <http://submission.summitmd.com/login.php?iid=40>.
- Submission period is until **November 20(Fri), 2020**, please meet the deadline. For submission, join www.summitmd.com, if you are not a member yet.
- If you have several email accounts, we recommend you **NOT** to use Hotmail account for your ID; it blocks emails from us. It would be difficult to reach you for further notifications (acceptance alert, invitation, etc.).
- In case you are not able to recall your login Username/Password, please click "Forgot Your Password?"

2. Title

- The title of abstract should be within 300 bytes.
- It should be concise and specific, containing no abbreviations and indicating the nature of the investigation.
- The first letter of each word must be capitalized.

3. Author(s)

- The designation of single presenter is required to complete a submission.
- First author, presenter and co-author(s) can be the same person.
- Each Author's information must be completed for submission. **Be sure to proofread carefully** as the authors' information will be included in a JACC online supplement as well as e-poster uploaded onto the official website.
- Important notifications regarding your submission will be sent to the **submitter and designated presenter**. **Make sure all the contact information is correct.**

4. Abstract Categories

- Abstracts should involve the following disciplines in the field of cardiovascular medicine and intervention.
- Select one category that is closest to the subject of your abstract.
- If the category does not match the subject of the abstract, you may receive a low score from the reviewers.

CORONARY

Acute Coronary Syndromes (STEMI, NSTEMI-ACS)
Adjunctive Procedures (Thrombectomy, Atherectomy, Special Balloons)
Bifurcation/Left Main Diseases and Intervention
Cardiac Surgery/Hybrid Revascularization
Chronic Total Occlusion
Complex and Higher Risk Procedures for Indicated Patients (CHIP)
Complications
Drug-Eluting Balloons
Hemodynamic Support and Cardiogenic Shock
Pharmacology/Pharmacotherapy
Stents (Bare-metal, Drug-eluting)

ENDOVASCULAR

Aorta Disease and Intervention
Carotid & Neurovascular Intervention
Complications
Hypertension Therapies and Renal Denervation
Peripheral Vascular Disease and Intervention

IMAGING AND PHYSIOLOGIC LESION ASSESSMENT

Imaging: Intravascular
Imaging: Non-Invasive
Physiologic Lesion Assessment
Vulnerable Plaque

STRUCTURAL HEART DISEASE

Congenital Heart Disease (ASD, PDA, PFO, VSD)
Hypertrophic Obstructive Cardiomyopathy
Left Atrial Appendage Closure

Pulmonary Intervention: CTEPH, PHTN
Valvular Intervention: Aortic
Valvular Intervention: Mitral or Tricuspid
Others (Structural Heart Disease)

OTHER

Basic Science, Animal Models and Preclinical Studies
Cell Therapy and Angiogenesis
Diabetes
Genomics/Proteomics
Innovative Devices and Futuristic Therapies
Pre-Clinical/First In-Human Studies
Quality, Guidelines and Appropriateness Criteria
Renal Insufficiency and Contrast Nephropathy
Vascular Access (Transradial)
Women's Health Issues
Others (Unclassified)

5. Abstract Content

- Abstracts must be submitted in English.
- Abstracts body consists of Background, Methods, Results, and Conclusion.
- Abstracts may be entered directly into the site or copied and pasted, however, be sure to check again whether the special characters or symbols are not broken.
- You can copy and paste an existing Excel table or create a new table using the provided system tools, however, be sure to check again whether the special characters or symbols are not broken.
- The maximum number of characters allowed in the body of the abstract is 2200 (approximately 300-350 words).
Spaces are included.
- Use zeros before decimal points: 0.05, not .05.
- Use decimal points, not commas: 0.05, not 0,05.
- Use lowercase "p" values ($p < 0.05$).
- Provide a manufacturer name and location in parentheses for all brand or trade names.
 - Never use the underline feature to denote the following symbols: \pm , \leq , \geq .
- Use space between numbers and symbols. (e.g., 3 ± 4 , not 3 ± 4 ; 3 mg, not 3mg).
- All measurements must include unit of measure (e.g., systolic blood pressure "140 mmHg", not just "140").
- For brand drugs, include generic names in parentheses.
- Do not include references, credits, or grant support.

6. Abstract Review

- All submitted abstracts will be thoroughly evaluated by official reviewers, and it will influence the allocation to two different types of sessions - *Late Breaking Clinical Trials Session* and *Abstract Presentation Session*.

7. Abstract Acceptance Notification

- An acceptance notification will be made on **January 15, 2021** to the designated presenter and the submitter.
- After the notification, presenters will be informed of their presentation date and time with specific guidelines for session.

8. Abstract Presentation

- All selected abstracts will be allocated to 1) *Late Breaking Clinical Trials Session* or 2) *Abstracts Presentation Session* based on the scores assigned by official reviewers.

1) Late Breaking Clinical Trials Session

- Abstracts containing novel findings that may improve current practices will be presented at this session.
- Note that duplicate study will not be accepted.
- A cash reward & award certificate will be given to each LBCT presenter.
- LBCT will be featured in a *TCTAP's Daily News* as well as published in an *online supplement of 'The Journal of the American College of Cardiology'*.

2) Abstract Presentation Session

- Selected abstracts must be prepared in MS PowerPoint for both oral presentation and e-poster.
- All presenters get advantages when they apply for Best Young Scientist Award.
- Selected abstracts will be published in an online supplement of '*The Journal of the American College of Cardiology(JACC)*'.

9. Abstract Withdrawal

- Before November 27, 2020, you may log in and withdraw your submission at any time.
- After November 27, 2020, please email at abstract@summitmd.com with your submission number and title to request withdrawal.
- A request for withdrawal must be made by March 31, 2021.

10. No Show Policy

- If you are not available to make a presentation, please notify the secretariat in advance via e-mail at abstract@summitmd.com. If the scheduled presenter fails to appear in person or to send a replacement, and does not cancel the presentation before the meeting, that presenter may jeopardize future acceptance of Calls for Science.

11. Copyright Information

When abstracts are submitted, we assume that the authors grant copyright to the Congress Organization for publication on the website www.summit-tctap.com, www.ap-valves.com and summitmd.com. By submitting an abstract for the conference, the presenter verifies that the abstract's content and its conclusion should not have been published in any other meeting before our meeting.

12. Assistance

If you need help with your submission, please contact us at +82 2 3010 7251 or email abstract@summitmd.com.

CASE SUBMISSION GUIDELINES

1. General Information

- Submission is only available online at <http://submission.summitmd.com/login.php?iid=40>.
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- Important notifications regarding your submission will be sent to the **submitter and designated presenter**. **Make sure all the contact information is correct.**

4. Case Categories

- Cases should involve the following disciplines in the field of cardiovascular medicine and intervention.
- Select one category that is closest to the subject of your case.
- If the category does not match the subject of the case, you may receive a low score from the reviewers.

CORONARY

Acute Coronary Syndromes (STEMI, NSTEMI-ACS)
Adjunctive Procedures (Thrombectomy, Atherectomy, Special Balloons)
Bifurcation/Left Main Diseases and Intervention
Cardiac Surgery/Hybrid Revascularization
Chronic Total Occlusion
Complex and Higher Risk Procedures for Indicated Patients (CHIP)
Complications
Drug-Eluting Balloons
Hemodynamic Support and Cardiogenic Shock
Pharmacology/Pharmacotherapy
Stents (Bare-metal, Drug-eluting)

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Pre-Clinical/First In-Human Studies
Quality, Guidelines and Appropriateness Criteria
Renal Insufficiency and Contrast Nephropathy
Vascular Access (Transradial)
Women's Health Issues
Others (Unclassified)

5. Case Content

- Cases must be submitted in English.
- The case body consists of Clinical information, Procedural step and Conclusion.
- Cases may be entered directly into the site or copied and pasted, however, be sure to check again whether the special character or symbols are not broken.
- Do not include patient's full name (initials or identifier number allowed).
- The maximum numbers of characters allowed in the body of clinical information is 1500, and 2200 for Procedural step and Conclusion.
- The minimum numbers of characters allowed in the body of clinical information is 600, and 700 for Procedural step and Conclusion.
- Images and videos should be included to show the procedure.
- Use zeros before decimal points: 0.05, not .05.
- Use decimal points, not commas: 0.05, not 0,05.
- Use lowercase "p" values ($p < 0.05$).
- Provide manufacturer name and location in parentheses for all brand or trade names.
- Never use the underline feature to denote the following symbols: \pm , \leq , \geq .
- Use space between numbers and symbols. (e.g., 3 ± 4 , not 3 ± 4 ; 3 mg, not 3mg).
- All measurements must include unit of measure (e.g., systolic blood pressure "140 mmHg", not just "140").
- For brand drugs, include generic names in parentheses.
- Do NOT include references, credits, or grant support.
- **It is MANDATORY to attach 3 images or videos for procedural step.**

6. Case Review

- All submitted cases will be thoroughly evaluated by our official reviewers.

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