

CASE SUBMISSION GUIDELINES

1. General Information

Submission Deadline

- Submission is only available online at <https://submission.summitmd.com/login.php?iid=52>
- Submission closes on **Friday, November 8, 2024, 11:59:59 PM KST(UTC +9)**. Please complete the submission before the deadline.

ID/Password for Submission

- To submit a case, you must join www.summitmd.com first. If you haven't signed up yet, please join summitMD before the submission.
- You are advised **NOT** to use a Hotmail account for your ID as it blocks emails from us. If you use a Hotmail account, you may not be able to receive important notifications including acceptance letters, invitations, and further information about the presentation.
- If you forgot your user ID (email address) or Password, click "Forgot Your Password?" to reset the password.

2. Title

- The title of the case should be within 300 characters.
- It should be concise and specific, containing no abbreviations and indicating the nature of the investigation.
- **Please capitalize your title in proper APA style before the submission.**
Convert your title [here](#) to APA style and manually revise afterward.

ex) **A Challenging Case Report: Instant Coronary Intervention in a Female Before Kidney Transplant**

3. Author(s)

The designation of a 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 provided for submission. **Be sure to proofread carefully** as the authors' information will be included in a JACC online supplement and on the official website.
- **Once you submit your case, a confirmation email will be sent to you (submitter). If your case is accepted, the designated presenter will receive further notification emails for the presentation, and the submitter will receive emails for the JACC issue; Make sure all the contact information is correct.**

4. Categories

- Cases should involve the following disciplines in 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

ACS/AMI

Complex PCI

- Calcified Lesion
- Long Lesion
- Tandem Lesion
- CTO
- Multi-Vessel Disease
- Small Vessel Disease
- Left main
- Bifurcation
- In-Stent Restenosis

Imaging & Physiology

- FFR
- Invasive Imaging (IVUS, OCT, NIRS, VH, etc.)
- Non-Invasive Imaging (CTA, MRI, Echo, etc.)
- Angiography/QCA

High-Risk Intervention (Diabetes, Heart Failure, Renal Failure, Shock, etc.)

Vascular Access and Closure

Adjunctive Procedures (Thrombectomy, Atherectomy, Special Balloons)

Complication Management

DES/BRS/DCB

Hemodynamic Support
Pharmacotherapy
Surgical Therapy
Clinical Trials & Science

STRUCTURAL

Aorta Disease and Intervention

- Bicuspid AV
- Minimalist TAVR
- Valve in Valve TAVR
- Antithrombotics
- Coronary Artery Protection / Access
- Complex TAVR
- Non-femoral TAVR

Mitral Valve Intervention

- TEER
- Transcatheter MV Repair
- Transcatheter MV Replacement

Tricuspid Valve Intervention

Imaging

- Computed Tomography
- Echocardiography

Pulmonic Valve Intervention

LAAO

Surgical Therapy

Other Structural Interventions

ENDOVASCULAR

Iliac / SFA Intervention

Stroke and Neurovascular Interventions

Thoracic & Abdominal Aortic Interventions

Venous Disease Intervention

Carotid Intervention

Other Endovascular Intervention

Thrombus Removal Devices and Techniques

Surgical Therapy

HEART FAILURE

Vascular Heart Disease and Cardiomyopathies

Cardiogenic Shock

Mechanical Circulatory Support

Pharmacotherapy

Surgical Therapy

INNOVATION

Digital Health and Artificial intelligence

Technology Trends in Coronary Intervention

Technology Trends in Valve Intervention

Pharmacotherapy

Surgical Therapy

5. Contents

Basic info / Requirements

- Cases must be submitted in English.
- Cases consist of 3 sections: Clinical Information* (Relevant Clinical History and Physical Exam*, Relevant Test Results Prior to Catheterization), Procedural Step*, Conclusions*. *Required.
- Min/Max Character / Image Requirements:
 - **Relevant Clinical History and Physical Exam:** Min 200, Max 500 Char / **images required**
 - **Relevant Test Results Prior to Catheterization:** Max 500 Char (optional)
 - **Procedural Step:** Min 500, Max 1500 Char / **3 images required**
 - **Conclusions:** Min 200, Max 700 Char
- In preparation for your possible publication in the JACC online supplement, please upload up to three images in each section.

- [Optional] To increase your chance of acceptance, you can upload videos separately, but they will be only accessible during review and won't be published.

Check Before You Submit

- 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 the patient's full name.
- Double-check the uploaded image files. Only image files will be published in the supplement, while the videos will only be used for acceptance review.
- 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 a 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 THREE images for the Procedural Step.**

6. Review

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

7. Acceptance Notification

- The presenters of the accepted cases will be notified in mid-January 2025.
- After the notification, presenters will be informed of their presentation date and time with specific guidelines for the session.

8. Presentation

- Accepted cases will be allocated to 1) *Moderated Oral Case Competition* or 2) *E-Poster Presentation (Online Only)* based on the scores assigned by official reviewers.
- **All accepted cases will be published in the online supplement of the Journal of the American College of Cardiology (JACC).**

✂ *For every type of presentation, a presenter is required to submit a presentation slide.*

Session Type

1) Moderated Oral Case Competition

- This competition session will be led by prestigious moderators and panelists.
- The best presenter who gets the highest score from moderators and panelists will get a cash prize.

2) E-Poster Presentation (Online PPT Presentation: E-Science Station)

- Cases assigned to the E-Poster Presentation will be uploaded on E-Science Station, TCTAP website.
- Presenters do not present their case on-site, but a PPT file with audio will be posted online.

*** Benefits for All Presenters:**

- An advantage in applying for the Best Young Scientist Award.
- **All selected cases will be published in an online supplement of the Journal of the American College of Cardiology (JACC).**
- Free attendance to TCTAP 2025.

9. Withdrawal

- Before December 1, 2024, you may log in and withdraw your submission.
- After December 1, 2024, please email submission@cvrf.org with your submission number and title to request a withdrawal.
- A withdrawal request must be made by March 9, 2025.

10. No-Show policy

When you cannot attend the session to present your case, please notify the secretariat in advance via email at submission@cvmf.org. If the presenter fails to show up or sends a replacement without any notification, it may affect the acceptance of Call for Science in future conferences.

11. Copyright Information

When cases are submitted, we assume that the authors grant copyright to the Congress Organization for publication on the websites <https://www.summit-tctap.com/2025/> and summitmd.com. By submitting a case for the conference, the presenter verifies that the case'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 4799 or email submission@cvmf.org.