

## General

*General Thoracic and Cardiovascular Surgery* is the official publication of The Japanese Association for Thoracic Surgery and The Japanese Association for Chest Surgery, the affiliated journal of The Japanese Society for Cardiovascular Surgery, which publishes clinical and experimental studies in fields related to thoracic and cardiovascular surgery. Manuscripts should be in one of the following categories: 1) Original Article, 2) Case Report, 3) How to Do It, 4) Review Article, 5) Letter to the Editor, and 6) Rapid Communication, and should be submitted online to: <http://www.editorialmanager.com/gtcs/>, using Editorial Manager.

All submitted manuscripts will be peer-reviewed by two or more referees. Acceptance is based upon significance, originality, and validity of the material presented. If the manuscript is accepted for publication, editorial revisions may be made to improve clarity and understanding without altering the meaning. Please note: no changes concerning authorship are allowed once the manuscript is accepted.

### **Annual Award for Excellent Scientific Paper**

A prize will be awarded annually by the Japanese Association for Thoracic Surgery for the best scientific paper.

**Eligibility:** All papers that are categorized as Original Articles, published in one of the 12 issues of *General Thoracic and Cardiovascular Surgery* during the year preceding the selection. **Selection Procedure:** A maximum of three best scientific papers, regardless of the field, will be selected from among the Original Articles published in the 12 issues preceding the selection.

**Award:** The winner will be awarded a certificate along with a prize given by the Association at the Annual Scientific Meeting.

### **Certification Form**

All manuscripts must be accompanied by the statement that is attached at the end of the Instructions for Authors and must be signed by all authors. The form is also available at: <http://www.springer.com/11748>. A scanned file (PDF, TIFF, or JPEG) of the original signed agreement should be uploaded as a file at the time of online submission. All manuscripts must be the original work of the author(s) and be certified by the statement mentioned above that the material has not been previously published in any language. Upon receipt of the Certification Form described above, manuscripts are officially recognized as submissions.

## Ethical Standards

### **Studies with Human Subjects**

Investigations in humans must be in accordance with the ethical standards of the responsible committee (institutional or regional) or with the Helsinki Declaration of 1964 and all subsequent revisions. All experimental studies require informed consent in due course, and the author(s) of the work should specify in the manuscript that such consent was obtained.

If doubt exists whether the research was conducted in accordance with the Helsinki Declaration, the authors must explain the rationale for their approach, and demonstrate that the institutional review body explicitly approved the doubtful aspects of the study.

If any identifying information about patients is included in the article, the following sentence should also be included:

Additional informed consent was obtained from all patients for which identifying information is included in this article.

### **Studies with Animals**

All experiments involving animals should be in accordance with standard guidelines as recommended by the Science Council

of Japan (<http://www.scj.go.jp/en/animal/index.html>) or the National Research Council's criteria (NIH publication No. 86-23, revised 1985) and the author(s) should include a statement to that effect in the Methods section of the manuscript.

### **Potential Conflict of Interest**

Authors must indicate whether or not they have a financial relationship with the organization that sponsored the research. They should also state that they have full control of all primary data and that they agree to allow the journal to review their data if requested. Therefore the manuscript must be accompanied by the "Conflict of Interest Disclosure Statement". This form can be obtained from <http://www.springer.com/journal/11748/>. In a manuscript submitted to *General Thoracic and Cardiovascular Surgery*, all disclosures should be inserted by the corresponding author in the "Conflict of Interest" before the reference list, as shown in the following example.

The Conflict of Interest statement should list each author separately by name:

#### **Conflict of Interest Statement**

A (author name) serves as a consultant to Z (entity name); B's spouse is chairman of Y; C received a research grant from X; D received lecture fees from V; E holds a patent on U; F has been reimbursed by T for attending several conferences; G received honoraria for writing promotional material for S; H has no conflict of interest.

### **Registration of clinical trials**

As of June 1, 2013, the journal requires all clinical trials that prospectively assign human subjects to medical interventions, comparison groups, or control groups for the purpose of examining the potential health effects of such interventions, to be registered in one of several free, publicly accessible, non-profit electronically searchable databases such as the one administered by the National Library of Medicine (NLM), which is located at <http://www.clinicaltrials.gov>.

Trials that begin after June 1, 2013 must register before enrollment of the first study subject, and trials that began before the deadline must register prior to editorial review. Submitted manuscripts must include the unique registration number in the Methods section as evidence of registration. For details regarding the required minimal registration data set, please go to the International Committee of Medical Journal Editors (ICMJE) site at [http://www.icmje.org/#clin\\_trials](http://www.icmje.org/#clin_trials).

The journal accepts registration in the following registries:

- <http://www.clinicaltrials.gov/> (Clinical Trials)
- <http://actr.org.au> (Australian Clinical Trials Registry)
- <http://isrctn.org> (ISRCTN Register)
- <http://www.trialregister.nl/trialreg/index.asp> (Netherlands Trial Register)
- <http://www.umin.ac.jp/ctr> (UMIN Clinical Trials Registry)

## Preparation of Manuscripts

The manuscript must be written in English, typed double spaced with wide margins throughout. "Times" is the preferable type font. Authors who are not fluent in English must seek the assistance of a colleague who is a native English speaker and is familiar with the field of the work.

### **Types of Articles**

#### **1. Original Article**

The number of authors is limited to 10. The basic structure must consist of Abstract, Introduction (including Objective(s)), Subject(s), Methods, Results, Discussion, and Conclusion, and must be limited to 7 printed pages, including title page, abstract, references, tables and figures.

## 2. Case Report

The number of authors is limited to 10. The basic structure must consist of Abstract, Introduction, Case(s), Discussion, and Conclusion, and must be limited to 3 printed pages, including title page, abstract, references, tables and figures.

## 3. How to Do It

The number of authors is limited to 6. This category includes short articles on methods or techniques recommended for surgery. This type article is limited to 2 printed pages including the title page, abstract, text, up to 8 references, figures with figure legends, and a maximum of 5 key words.

## 4. Review Article

The number of authors is limited to 10. The basic structure consists of abstract, text, all references, tables, and figures with legends, and is limited to 8 printed pages, including title page, abstract, references, tables and figures.

## 5. Letter to the Editor

Any view or opinion on an article appearing recently in the Journal is welcome. A letter should not exceed 500 words including references, if necessary. Letters are published at the editor's discretion and may be edited for clarity.

## 6. Rapid Communication

Concise papers that are noteworthy and original will be considered for publication as a Rapid Communication. The maximum length is 1 printed pages, including tables and figures. No more than 6 authors can be listed, and an abstract is required. A printed page is approximately equivalent to 800 words.

### **Title Page**

A separate sheet should be used for the title of the work, full name(s) of the author(s), each with his or her highest academic degree and institution, followed by the address to be used for correspondence, with telephone number, fax number, and email address.

Key words, which are limited to 5, should be listed following the address for correspondence.

### **Abstract**

A structured abstract is to be written on a separate page following the title page of an Original Article and a Review Article. A Case Report, How to Do It, and Rapid Communication should have a one-paragraph, unstructured abstract. The abstract must not exceed 250 words for an Original Article or Review Article, and 150 words for a Case Report, How to Do It, and Rapid Communication. The structured abstract for an Original Article is to contain the following major headings: Objective(s), Methods, Results, and Conclusions. "Objective" is defined as the hypothesis or the purpose of the study. "Methods" are defined as the study design. "Results" include the outcome of the study and its statistical significance, if appropriate. "Conclusions" state the significance of the results. No abbreviations should be used in the title, the abstract, and the key words.

### **Tables**

Tables should be printed on separate pages, cited in order in the text, and numbered consecutively with Arabic numerals. Each table should have a brief informative title. All abbreviations that have been used should be explained in footnotes. Identify any previously published material by giving the original source in the form of a reference at the end of the table footnotes. Footnotes to tables should be indicated by superscript lowercase letters (or asterisks for significance values and other statistical data) and included beneath the table body.

### **Figures**

All figures should be cited in order in the text and numbered consecutively with Arabic numerals throughout. Letters, numbers, and symbols should be clear and even throughout and of sufficient size that when reduced for publication each item will still be legible. Figure parts should be identified by

lowercase roman letters (a, b, etc.). If figures are supplied with uppercase labeling, lowercase letters will still be used in the figure legends and citations. If a figure has been published previously, acknowledge its source and submit written permission of author and publisher. The previously published source should also be included in the list of references.

Color figures will always be published in color in the online and print version. All intraoperative pictures should be submitted in color. If submitted in black and white, authors may be requested to resubmit them in color. For more information about preparing figures, please refer to the Artwork Guidelines available at the end of this document.

### **Legends for Figures**

A brief descriptive legend (caption) should be provided for each figure. Legends are part of the text and should be appended to it on a separate page.

### **References**

References should be numbered consecutively in the order of their citation in the text. Reference citations in the text should be cited sequentially and should be identified by numbers in square brackets, e.g., Ames et al. [1] reported... Generally, references should not exceed 30 for an Original Article, 15 for a Case Report, or 100 for a Review Article.

– For journals: Name(s) and initial(s) of author(s), title of article, journal name, date, volume number, and inclusive pages (list all authors when six or fewer; when seven and more, list six and add et al.). The titles of journals should be abbreviated according to the style used in the List of Journals Indexed for MEDLINE, available from the U.S. National Library of Medicine at [www.nlm.nih.gov/tsd/serials/lji.html](http://www.nlm.nih.gov/tsd/serials/lji.html)

1. Minakawa M, Fukuda I, Inamura T, Yanaoka H, Fukui K, Daitoku K, et al. Hydrodynamic evaluation of axillary artery perfusion for normal and diseased aorta. *Gen Thorac Cardiovasc Surg.* 2008; 56: 215-21.
2. Rao V, Christakis GT, Weisel RD, Buth KJ, Ikonomidis JS, Shirai T, et al. Changing pattern of valve surgery (abstract). *Circulation* 1996; 94 (Suppl): III13-20.
3. Mitchell AJ, Vaze A, Rao S. Clinical diagnosis of depression in primary care: a meta-analysis. *Lancet.* 2009. Doi: 10.1016/S0140-6736 (09) 60879-5.

– For books: Name(s) and initial(s) of author(s), chapter title, name(s) and initial(s) of editor(s), book title, edition, city, publisher, date, and pages:

1. Reul GJ. Revascularization of the ischemic myocardium. In: Cooley DA, editor. *Techniques in cardiac surgery.* 2nd ed. Philadelphia: W.B. Saunders, 1984. p. 221–58.

### **Electronic Supplementary Material**

Electronic supplementary material will be published in the online version only. It may consist of

- Information that cannot be printed: animations, video clips, sound recordings
- Information that is more convenient in electronic form: sequences, spectral data, etc.
- Large original data, e.g. additional tables, illustrations, etc.

### **Submission**

- Supply all supplementary material in standard file formats.
- Please include in each file the following information: article title, journal name, author names; affiliation and e-mail address of the corresponding author.
- To accommodate user downloads, please keep in mind that larger-sized files may require very long download times and that some users may experience other problems during downloading.

### **Audio, Video, and Animations**

- Always use MPEG-1 (.mpg) format.

#### Text and Presentations

- Submit your material in PDF format; .doc or .ppt files are not suitable for long-term viability.
- A collection of figures may also be combined in a PDF file.

#### Spreadsheets

- Spreadsheets should be converted to PDF if no interaction with the data is intended.
- If the readers should be encouraged to make their own calculations, spreadsheets should be submitted as .xls files (MS Excel).

#### Specialized Formats

- Specialized formats such as .pdb (chemical), .wrl (VRML), .nb (Mathematica notebook), and .tex can also be supplied.

#### Collecting Multiple Files

- It is possible to collect multiple files in a .zip or .gz file.

#### Numbering

- If supplying any supplementary material, the text must make specific mention of the material as a citation, similar to that of figures and tables.
- Refer to the supplementary files as “Online Resource”, e.g., “... as shown in the animation (Online Resource 3)”, “... additional data are given in Online Resource 4”.
- Name the files consecutively, e.g. “ESM\_3.mpg”, “ESM\_4.pdf”.

#### Captions

- For each supplementary material, please supply a concise caption describing the content of the file.

#### Processing of Supplementary Files

- Electronic supplementary material will be published as received from the author without any conversion, editing, or reformatting.

#### Accessibility

In order to give people of all abilities and disabilities access to the content of your supplementary files, please make sure that

- The manuscript contains a descriptive caption for each supplementary material
- Video files do not contain anything that flashes more than three times per second (so that users prone to seizures caused by such effects are not put at risk)

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Upon acceptance of your article you will receive a link to the special Author Query Application at Springer’s web page where you can sign the Copyright Transfer Statement online. Once the Author Query Application has been completed, your article will be processed and you will receive the proofs. You will also receive a separate e-mail for ordering offprints and printing of figures in color.

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Online and print publication of color illustrations is free of charge.

#### *Proofreading*

The purpose of the proof is to check for typesetting or conversion errors and the completeness and accuracy of the text, tables and figures.

Substantial changes in content, e.g., new results, corrected values, title and authorship, are not allowed without the approval of the editor responsible. In such a case, please contact the editorial office before returning the proofs to the publisher. After online publication, further changes can only be made in the form of an Erratum, which will be hyperlinked to the article.

#### *Online First*

The article will be published online after receipt of the corrected proofs. This is the official first publication citable with the DOI. After release of the printed version, the paper can also be cited by issue and page numbers.

#### Manuscript Submission via Editorial Manager

Authors should submit their manuscripts to General Thoracic and Cardiovascular Surgery online. Please login directly at: <http://www.editorialmanager.com/gtcs/> and upload your manuscript following the instructions given on the screen. Please use the Help option to see the most recently updated system requirements.

#### Artwork Guidelines

##### *Electronic Figure Submission*

- Supply all figures electronically.
- Indicate what graphics program was used to create the artwork.
- For vector graphics, the preferred format is EPS; for halftones, please use TIFF format. MS Office files are also acceptable.
- Vector graphics containing fonts must have the fonts embedded in the files.
- Name your figure files with “Fig” and the figure number, e.g., Fig1.eps.

##### *Line Art*

- Definition: black and white graphic with no shading.
- Do not use faint lines and/or lettering, and check that all lines and lettering within the figures are legible at final size.
- All lines should be at least 0.1 mm (0.3 pt) wide.
- Scanned line drawings and line drawings in bitmap format should have a minimum resolution of 1200 dpi.

##### *Halftone Art*

- Definition: photographs, drawings, or paintings with fine shading, etc.
- If any magnification is used in the photographs, indicate this by using scale bars within the figures themselves.
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##### *Combination Art*

- Definition: a combination of halftone and line art, e.g., halftones containing line drawing, extensive lettering, color diagrams, etc.

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#### ***Color Art***

- Color art is free of charge for online and print publication.
- Color illustrations should be submitted as RGB (8 bits per channel).

#### ***Figure Lettering***

- To add lettering, it is best to use Helvetica or Arial (sans serif fonts).
- Keep lettering consistently sized throughout your final-sized artwork, usually about 2–3 mm (8–12 pt).
- Variance of type size within an illustration should be minimal, e.g., do not use 8-pt type on an axis and 20-pt type for the axis label.
- Avoid effects such as shading, outline letters, etc.
- Do not include titles or captions into your illustrations.

#### ***Figure Numbering***

- All figures are to be numbered using Arabic numerals.
- Figures should always be cited in the text in consecutive numerical order.
- Figure parts should be denoted by lowercase letters (a, b, c, etc.).
- If an appendix appears in your article/chapter and it contains one or more figures, continue the consecutive numbering of the main text. Do not number the appendix figures, “A1, A2, A3, etc.” Figures in online appendices (Electronic Supplementary Material) should, however, be numbered separately.

#### ***Figure Captions***

- Each figure should have a concise caption describing accurately what the figure depicts. Include the captions in the text file of the manuscript, not in the figure file.
- Figure captions begin with the term Fig. in bold type, followed by the figure number, also in bold type.

- No punctuation is to be included after the number, nor is any punctuation to be placed at the end of the caption.
- Identify all elements found in the figure in the figure caption; and use boxes, circles, etc., as coordinate points in graphs.
- Identify previously published material by giving the original source in the form of a reference citation at the end of the figure caption.

#### ***Figure Placement and Size***

- When preparing your figures, size figures to fit in the column width.
- Figures should be 39 mm, 84 mm, 129 mm, or 174 mm wide and not higher than 234 mm.
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#### ***Accessibility***

In order to give people of all abilities and disabilities access to the content of your figures, please make sure that

- All figures have descriptive captions (blind users could then use a text-to-speech software or a text-to-Braille hardware)
- Patterns are used instead or in addition to colors for conveying information (color-blind users would then be able to distinguish the visual elements)
- Any figure lettering has a contrast ratio of at least 4.5:1.



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