



# Case Submission Guidelines

## Important Dates

Case submission site opens	Tuesday, November 12, 2024
Case submission deadline	Tuesday, January 14, 2025
Case decision date	Friday, February 7, 2025
Case withdrawal deadline	Friday, February 14, 2025

## Formatting

1. **Character limit:** Cases are limited to 500 characters, not including spaces.
2. **Format:** Cases must contain the following 4 sections: Title, Introduction, Clinical Case, and Discussion.
3. **Authorship:** There is no limit on the number of authors; however, all authors should satisfy the [ICMJE authorship criteria](#). Group names are not permitted, SCAI only allows individual names.
4. **Figures/Tables:** Images are not allowed in the case report; however Case submissions also require a PPT file. The PPT can contain images, videos and text.

## Policies

1. Where authors use generative artificial intelligence (AI) and AI-assisted technologies in the writing process, authors should use these technologies only to improve readability and language. The technology should be applied with human oversight and control, and authors should carefully review and edit the result, as AI can generate authoritative-sounding output that can be incorrect, incomplete, or biased.
2. The SCAI Program Committee endorses the position of the American Association for the Advancement for Science ([AAAS](#)) in requiring assurances of the responsible use of animals in research as well as the ethical principles outlined in the [World Medical Association \(WMA\) Declaration of Helsinki](#) for human medical research. All submissions for consideration must follow these guidelines.
3. Case submissions must fit into one of the following categories:
  - a. Acute Coronary Syndromes & MI
  - b. Adult Congenital
  - c. Aortic Valve Interventions
  - d. Cardio-Oncology
  - e. Cardiogenic Shock
  - f. Complex PCI & Restenosis (Excluding Left Main & Multi-Vessel Intervention)
  - g. Imaging: CT, MR, and Non-Invasive Imaging
  - h. Intervention for Stable Ischemic Heart Disease
  - i. Interventional Heart Failure (Excluding Cardiogenic Shock) and Post-Transplant Care
  - j. Interventions for Afib

- k. Intravascular Imaging (IVUS / OCT / NIR / Other) and Physiology (FFR / iFR / MR / Other)
- l. Left Main & Multi-Vessel Intervention
- m. Mechanical Circulatory Support (MCS)
- n. Miscellaneous
- o. Other Endovascular Interventions (Including AAA, Carotid, DVT, Renal Denervation and Venous Disease)
- p. PAD & CLI
- q. Pediatric
- r. Pharmacotherapy
- s. Pulmonary Artery Interventions (Including PE & PH)
- t. Quality Improvement
- u. Structural Heart Disease (Excluding Valvular Interventions)
- v. Thrombectomy and Vulnerable Plaque
- w. Valve Interventions (Excluding Aortic Valve-Interventions)
- x. Vascular Access and Arterial Closure Devices

## **Submission, Revision, and Withdrawal**

1. All case submissions must be completed by the case submission deadline.
2. Once a case is submitted, SCAI will communicate only with the designated presenting author.
3. All case revisions must be completed by the case submission deadline. Revisions will only be accepted by the presenting author. This includes changes to author names, author order, author affiliation, and the addition or deletion of authors. SCAI is not responsible for work that is not submitted by the case submission deadline.
4. Cases may be withdrawn by the case withdrawal deadline.
5. Requests to withdraw a case must be submitted in writing to [cases@scai.org](mailto:cases@scai.org) by the presenting author by the case withdrawal deadline