



January 29 - 31 Miami Beach, Florida

Abstract, Surgical Video, and Late-Breaking Promissory Abstract Submission Instructions and Policies

You are invited to submit abstracts, surgical videos, and late-breaking promissory abstracts for the STS 58th Annual Meeting to be held in Miami Beach, Florida, January 29-31, 2022.

Submissions will be accepted until **Tuesday**, **August 3**, **2021**, **at 4:00 p.m. Eastern Time**. Accepted submissions will be presented at the STS 58th Annual Meeting as oral presentations, scientific e-posters, or surgical videos.

The STS Annual Meeting is a premier educational event, offering more translational science and activities than any other cardiothoracic surgery meeting in the world. Manuscripts corresponding to accepted oral presentations are **required to be submitted for publication consideration in** *The Annals of Thoracic Surgery*, which has a circulation of more than 6,700 worldwide. This broad reach makes the STS Annual Meeting the best forum for disseminating information related to the field of cardiothoracic surgery.

Submission Instructions:

- To access the online abstract submission site, you must log into the STS Web Portal with your username and password at sts.org/abstracts. If you have trouble logging in, contact STS Member Services at membership@sts.org.
- If you are a current or former STS member, or if you attended a prior STS Annual Meeting and provided STS with an email address, an account for you already exists.
- If you do not have an account, you will need to create one by clicking on the "Get Started" link located on the welcome screen.
- Be sure to save your username and password for future use. You will need to enter this information each time you want to access the submission site.
- Email is the sole means of communication from STS regarding your abstract(s). Should any email address change prior to the STS Annual Meeting, please provide the updates to education@sts.org.
- Once you begin entering an abstract or surgical video, you have until **Tuesday**, **August 3**, **2021**, **at 4:00 p.m. Eastern Time** to submit your abstract and/or surgical video for review.
- Please check that the "Task List" page is complete with green check marks. Your abstract will not be reviewed unless all necessary information is provided.
- Please do not enter duplicate submissions if you have forgotten your username and password. STS staff can help you obtain your username and password if you misplace them. If this happens, please contact STS Member Services at membership@sts.org or 312-202-5800.
- Once you have completed the process and submitted your abstract or surgical video for review, you will receive an email confirmation. Please save this confirmation for your reference and use the abstract ID number in any correspondence you have with STS regarding your abstract and/or surgical video. If you do not receive an email confirmation, please contact STS at education@sts.org.

Submission Categories

For your submission, you are required to select one category (in bold below) and one corresponding subcategory.

- I. Adult Cardiac
 - a. Aorta and Endovascular
 - b. Aortic Valve (Open/Transcatheter)
 - c. Atrial Fibrillation/Arrhythmia
 - d. Basic Science Research

- e. Coronary Artery Disease
- f. Mitral Valve (Open/Transcatheter)
- g. Tricuspid Valve (Open/Transcatheter)
- h. Other/Novel Technologies

II. Congenital

- a. Adult Congenital Heart Disease
- b. Basic Science Research/Education
- c. Neonatal and Pediatric Cardiac
- d. Heart Failure/Mechanical Circulatory Support/Transplant
- e. Other

III. General Thoracic

- a. Airway/Lung/Pleural Space
- b. Basic Science Research
- c. Esophagus
- d. Mediastinum/Chest Wall/Rare Tumors
- e. Infections
- f. Other

IV. Critical Care and Temporary Mechanical Circulatory Support

- a. End-Stage Heart Failure/Transplant
- b. End-Stage Lung Failure/Transplant
- c. Extracorporeal Membrane Oxygenation (VV and VA)
- d. Rescue Therapy (CALS, Failure to Rescue, Postcardiotomy shock)
- e. End of life discussions (Palliative Care and Hospice)
- f. Non-ECMO Temporary Devices (Heart Failure, Cardiogenic Shock)
- g. Bridge to transplantation utilizing temporary MCS
- h. Other

V. Education/Quality/Wellness

- a. Cardiothoracic Surgical Education
- b. Quality Improvement
 - Patient Care
 - Protocol Driven Recovery (ERAS, PADIS)
 - Patient Education
- c. Physician/Provider Wellness
- d. Other

Abstract and Surgical Video Submission Specifications (NOT Late Breaking):

Your abstract must conform to the following guidelines:

- Title case: Capitalize the first letter of each main word in the title; please do not enter information in all upper case or in quotation marks.
- Title length: No limit.
- Abstract maximum word length:

Purpose: 50 words Methods: 100 words Results: 150 words Conclusions: 50 words

- Spacing: Single space only. No double spacing permitted. **No hard returns.**
- Tables: Up to one (1) table allowed. The table cannot have more than five (5) columns of data.
 - o Files should be in one of the following formats: .jpg, .tif, or .png. (PowerPoint, Excel, and Word documents are not permitted.)
- Images: Up to one (1) image allowed.
 - o Images should be between 300 and 600 dpi at 3"x5".
 - o Files should be in one of the following formats: .jpg, .tif, or .png. (PowerPoint, Excel, and Word documents are not permitted.)

2

^{*}Please note: There is an option in the submission system to indicate whether or not your abstract relates to the COVID-19 pandemic.

Other:

- There should be no reference to the institutions involved in the body of the text. 0
- Abstracts cannot contain product names; generic terms must be used when describing a single product.
- The institution name, city, state, and email address information of the presenting author and all coauthors must be provided.
- When percentages are used, the absolute numbers of derivation must be stated.
- Each submission must include one multiple choice question that is associated with the content, along with four possible answers—one of which must be the correct answer, identified in the submission.
- Each submission requires three to four keywords relating to the abstract.
- Each submission requires a minimum of two bibliographic references related to the abstract.
- All abstracts must be structured using the following section headings, or they will not be accepted: Purpose - Include a brief statement on the intent of the study and the current state of research in the field. Specifically, describe the quality gap (limitation or problem) within the practice of cardiothoracic surgery that this research addresses.

Methods - The methods of the study or experimental approach should be clearly and briefly defined. **Results** - Provide a summary of the study findings, including sufficient details to support those conclusions. These may be presented in a brief table (no more than five columns of data). **Conclusions** - Include a statement concerning the significance of the work and its implications for further research. In what way might the results of this project supplement or inform clinical or research knowledge or strategies?

Surgical How To Video Specifications

- An abstract must be submitted along with each surgical video submission.
- Information for all authors involved in the submission must be entered via the online submission process. The identity of the authors, institutions, and/or names of hospitals should be excluded from the actual video itself.
- The surgical video may not exceed 8 minutes in length.
- All surgical videos must be submitted in .mp4, .mov, .avi, or .wmv format. If you do not submit your video in one of these formats, it will not be forwarded for review.
- For purposes of review, sound should be included.
- If the surgical video is selected, live narration by the presenting author is required for participation in the program.

Late-Breaking Abstract Submission Specifications

- Reserved for Phase I, II, or III clinical trials for which no preliminary data are available at the time of the abstract submission deadline of Tuesday, August 3, 2021, but are expected by Monday, December 13, 2021.
- If your promissory abstract is approved, the complete late-breaking abstract with results and conclusions must be submitted by Monday, December 13, 2021, at 4:00 p.m. ET.
- Abstracts must conform to the following guidelines:
 - Title case: Capitalize the first letter of each main word in the title; please do not enter information in all upper case or in quotation marks.
 - o Title length: No limit.
 - O Abstract maximum word length:
 - Purpose: 50 words
 - Methods: 100 words (Must include trial design and primary clinical endpoints.)
 - Results: Not required by the August 3, 2021 deadline.
 - Conclusions: Not required by the August 3, 2021 deadline.
- Tables: Up to one (1) table allowed. The table cannot have more than five (5) columns of data.
 - o Files should be in one of the following formats: .jpg, .tif, or .eps. (PowerPoint, Excel, and Word documents are not permitted.)
- Images: Up to one (1) image allowed.
 - o Images should be between 300 and 600 dpi at 3"x5" and in one of the following formats:

Awards

The Society will once again offer the President's Award, which will be selected from abstracts submitted by residents or young investigators who have completed their cardiothoracic surgery training in the past 5 years. These abstracts will be assessed based on quality and potential impact on the field of cardiothoracic surgery. The President's Award recipient will be recognized at the Awards Presentation during the Plenary Session at the Annual Meeting.

The Thoracic Surgery Directors Association (TSDA) will once again offer the Benson R. Wilcox Resident Award. Potential award abstracts must represent original work by a cardiothoracic surgery resident enrolled in a U.S. ACGME-accredited cardiothoracic surgery residency program at the time the research was conducted. General surgery residents and previous TSDA Wilcox Award recipients are not eligible. Residents enrolled in their first 4 years of a 4/3 track are not eligible to apply; residents enrolled in their last 3 years of a 4/3 track are eligible to apply. The resident must be the first author and abstract presenter. Those who wish to be considered for this award should check the designated box when applying through the online abstract submission system. Poster abstracts and surgical video submissions are not eligible for the Wilcox Award. Wilcox Award abstracts may be accepted for presentation in the STS Annual Meeting General Session or Parallel Sessions. The Wilcox Award recipient will be recognized at the TSDA General Session and the STS Awards Presentation. Only cardiothoracic surgery resident enrolled at ACGME-accredited programs in the United States will be considered.

Review Process

To ensure fairness, abstracts are read and graded in a blinded fashion with no references to authors or institutions. The STS Annual Meeting scientific program will include oral presentations, scientific posters, and surgical videos. Submissions are reviewed by peer reviewers based on scientific merit, originality, and practice gaps identified. STS members have been selected by the Workforce on Annual Meeting Program Task Force to serve as reviewers for the STS 58th Annual Meeting.

Disclosure Information

Conflict of interest and FDA disclosures are required before an abstract and/or surgical video will be accepted for consideration. If a potential conflict of interest exists, be sure to include the name of the organization/company and the nature of the potential conflict.

- Each author must submit her/his individual disclosure when completing the abstract submission.
- It is the responsibility of the submitting author to identify each coauthor on the abstract. Upon submission of the abstract, an email will be sent to each coauthor, who will then be responsible for logging into the abstract system to complete her/his individual disclosure.
- If financial relationships and FDA disclosures are not received from all coauthors by the abstract submission deadline (4:00 p.m., Eastern Time, on Tuesday, August 3, 2021), the abstract will not be considered for review
- For live presentations, all relationships with ineligible companies and FDA disclosures, as defined in the STS Disclosure Policy, must be stated orally to the audience at the beginning of each presentation. In addition, a slide at the beginning of the PowerPoint presentation must be used to reveal the nature of the disclosure(s). This financial relationship and FDA disclosure information will be noted in published materials. Speakers are required to communicate that they have nothing to disclose, if that is the case.
- For scientific poster presentations, all financial relationships with ineligible companies, as defined in the STS Disclosure Policy, must be displayed on each scientific poster along with any FDA disclosures. This disclosure information also will be provided in the STS mobile app.

Education Disclosure Policy

As a sponsor of continuing medical education accredited by the Accreditation Council for Continuing Medical Education (ACCME), The Society of Thoracic Surgeons requires that any individual who is in a position to control the content of an educational activity must disclose all financial relationships with any ineligible companies. This is to ensure that that all decisions related to the planning, faculty selection, delivery, and evaluation of accredited

education are made without any influence or involvement from the owners and employees of an ineligible company. The ACCME defines ineligible companies as those whose "primary business is producing, marketing, selling, reselling, or distributing health care products used by or on patients." The question of whether a disclosed conflict situation could represent undue influence on the educational activity by an ineligible company or whether the disclosed information is sufficient to consider an abstract, presentation, or other educational enduring material to represent potentially biased information must be mitigated prior to an individual's involvement in STS educational programming.

Required disclosures must include all financial relationships with ineligible companies in the prior 24 months. Examples of financial relationships include employee, researcher, consultant, advisor, speaker, independent contractor (including contracted research), royalties or patent beneficiary, executive role, and ownership interest. Individual stocks and stock options should be disclosed; diversified mutual funds do not need to be disclosed. Research funding from ineligible companies should be disclosed by the principal or named investigator even if that individual's institution receives the research grant and manages the funds.

Individuals who are owners or employees of ineligible companies are excluded from controlling content or participating as planners or faculty in STS educational activities. There are three exceptions to this exclusion—employees of ineligible companies can participate as planners or faculty in these specific situations:

- 1. When the content of the activity is not related to the business lines or products of their employer/company.
- 2. When the content of the accredited activity is limited to basic science research, such as preclinical research and drug discovery, or the methodologies of research, and they do not make care recommendations.
- 3. When they are participating as technicians to teach the safe and proper use of medical devices, and do not recommend whether or when a device is used.

Disclosure is mandatory for any person involved in the planning, management, presentation, and/or evaluation of STS educational activities. Failure to disclose all relationships with ineligible companies disqualifies the individual from being a planning committee member, a teacher, or an author of educational materials, and this individual cannot have any responsibility for the development, management, presentation, or evaluation of STS educational activities. This requirement is intended neither to imply any impropriety of such relationships nor to prejudice any individual planner, presenter or author. It is merely to identify such relationships through full disclosure, and to allow STS to assess and mitigate potential influences on the educational activity prior to the planning and implementation of an educational activity. Speakers are required to disclose that they have nothing to disclose if this is the case.

Additionally, the fact that the presentation, paper, or other educational product describes (a) the use of a device, product, or drug that is not FDA approved or (b) an off-label use of an approved device, product, or drug or (c) a new or evolving topic advocating for, or promoting, practices that are not, or not yet, adequately based on current science, evidence, and clinical reasoning must also be disclosed. This requirement has been adopted in response to FDA policy and case law involving medical societies, and is not intended to prohibit or inhibit independent presentation or discussion regarding the uses of devices, products, and drugs as described in (a) or (b) above.

All relevant financial information will be disclosed to learners before they engage with or access STS educational content and activities. For live presentations, all disclosures must be stated orally and on a slide at the beginning of the presentation and will be noted in published material related to the activity. Disclosure to learners will include each of the following:

- 1. The names of the individuals with relevant financial relationships.
- 2. The names of the ineligible companies with which they have relationships.
- 3. The nature of the relationships.
- 4. A statement that all relevant financial relationships have been mitigated.

Disclosure to learners must not include ineligible companies' corporate or product logos, trade names, or product group messages. If applicable, the absence of relevant financial relationships with ineligible companies will also be disclosed to learners.

In order to ensure that STS educational activities are free of marketing or sales of products and services, faculty must not actively promote or sell products or services that serve their professional or financial interests during accredited education. Slides, handouts, and other materials utilized as part of an educational activity cannot contain any advertising, trade names or a product group message.

Amended by the STS Executive Committee: June 9, 2021

Withdrawal of an Abstract or Surgical Video

To withdraw an abstract or surgical video, the submitter until he/she becomes a presenter must notify STS in writing 60 days in advance of the Annual Meeting. Please email STS at education@sts.org and include the title of the abstract and/or surgical video and the abstract control number.

Abstract/Surgical Video Disposition Notification

At the time of submission, please ensure all author and coauthor email addresses are accurate as this is the only way that you can be contacted regarding the status of your abstract and/or surgical video submission(s).

On or after October 4, 2021, STS will send peer-reviewed selection results to the presenting author listed on the abstract via email only. Only the presenting author will be notified. We kindly ask that the presenting author communicate this information with all coauthors.

If you move to another location or change your email address, please contact STS at <u>education@sts.org</u> or 312-202-5800 to update your contact information.

THE SOCIETY OF THORACIC SURGEONS POLICY ON STS ANNUAL MEETING FOR SUBMITTERS, PRESENTERS, AND MODERATORS

Content Guidelines

- All scientific research referred to, reported, or used in accredited education in support or justification of a patient care recommendation must conform to the generally accepted standards of experimental design, data collection, analysis, and interpretation.
- Author listings should reflect those who performed and are accountable for conducting the research, analysis, and interpretation of findings. Criteria for authorship of conference abstracts and presentations are similar to those for publications in the Annals of Thoracic Surgery.
- Industry is not allowed to present abstracts, surgical videos, or scientific posters.
- All recommendations for patient care in accredited continuing education must be based on current science, evidence, and clinical reasoning, while giving a fair and balanced view of diagnostic and therapeutic options.
- Content that suggests unscientific approaches to diagnosis or therapy, or promotion of treatments, or manners of practicing healthcare that are determined to have risks or dangers that outweigh the benefits or are known to be ineffective in the treatment of patients is forbidden.
- Presenters are responsible for ensuring that the content being presented at the educational activity is consistent with and does not violate another organization's publication guidelines and conditions.
- Content must be free of marketing or sales of products or services. Faculty must not actively promote or sell products or services that serve their professional or financial interests during accredited education.
- Presented content should not include political or religious commentary, and all presentation content, including that which is displayed on the slide as well as verbally conveyed, must be professional and appropriate. Content that contains bullying, disrespectful language or images, or other material of an explicit and/or demeaning nature is unacceptable. All content should meet the Society's values of diversity, equity, and inclusion.
- Presentations must be submitted and presented in English unless otherwise noted in the submission guidelines or invitation.
- All presenters and moderators agree to adhere to the STS Code of Ethics. STS reserves the right to require modification or removal of content that does not comply with STS policies, or withdraw a presentation at any time and for any reason, and any such determination shall be final.

<u>Presentations</u>

- All content related to accepted oral abstracts at the STS Annual Meeting are under strict embargo until the date and time of the actual presentation. This includes press releases related to the presentation. STS will provide the media with full-text copies of any abstracts or articles in question prior to the embargo date so that stories can be adequately researched and written (communication with media will be coordinated with STS and should not occur independent of STS). Questions about this process can be directed to media@sts.org.
- For in-person presentations, each presenter is required to check in at the audio/visual desk or speaker ready room at least one (1) hour prior to his or her presentation time to load and test the presentation slides and/or other material (or via the virtual platform required by STS, if the Society determines that in person presentations will not take place and a virtual presentation will be used instead).
- Presenters/moderators must adhere to pre-determined time limits for their presentations and may be cut —off in their presentations if they go over the allotted time.
- If slides are used, the first slide (after title slide) must reflect the required disclosure information.
- Slides, handouts and other materials that are part of an educational activity cannot contain any marketing
 produced by or for an eligible company, including corporate or product logos, trade names, or product
 group messages.
- No patient identifying information can be visible within presentation materials (e.g., no names in echo scans, CT scans, or X-rays, and no photos of patients' faces or identifying marks).

Financial Disclosure and Conflicts of Interest

- All speakers and moderators agree to adhere to and follow the provisions set forth in the <u>STS Education</u> <u>Disclosure Policy</u>.
- Conflict of Interest and FDA disclosures are required before any presenter/moderator will be allowed to present.
- Study registration numbers (e.g., ClinicalTrials.gov, PROSPERO, EudraCT, US FDA) should be included on the disclosure slide to improve linkage between conference presentations and subsequent publications.
- To ensure that every presentation is fair and balanced, as well as free of commercial bias, all content is subject to review by the Workforce on Clinical Education. For this reason presenters must submit presentation materials to the Society at least 2 weeks prior to the actual activity.

Potential Discipline

Failure to comply with these policies may result in the potential loss of privileges for future meeting participation, including but not limited to a 2-year period of ineligibility for planning or presenting at the Annual Meeting and/or other Society educational activities. Violation of this policy by members of the Society may also result in the matter being referred to the STS Standards and Ethics Committee for possible disciplinary action.

ADDITONAL POLICIES FOR STS ANNUAL MEETING SUBMITTERS, PRESENTERS, AND MODERATORS ONLY

Abstract and Surgical Video Submissions

- Abstracts and surgical videos chosen for presentation are selected at the discretion of the Workforce on Annual Meeting to create a fair and balanced program.
- For any submitted abstract or surgical video, each co-author must complete his or her disclosure
 information in the Society's online submission system. The abstract or surgical video will not
 be reviewed or considered for acceptance unless and until all authors have completed their
 disclosures.
- Only electronic abstracts submitted using the Society's online submission system will be considered for presentation.
- Only authors (and not their assistants or other proxies) may complete submissions; authors will be responsible for the information provided via the online submission system.

- The submitting author must attest that (a) all co-authors of the abstract have granted consent for the material to be submitted for presentation, and (b) that the submitting author has been granted the right by all co-authors to act on their behalf.
- STS reserves the right to withdraw any abstract and/or surgical video from consideration or acceptance at any time.
- In the event that a change of presenter must be made after the submission of the abstract, the replacement must be a co-author of the content in question, and STS must be notified in writing of the change.
- Once an abstract and/or surgical video has been accepted, additional authors may not be added.
- If an abstract is not accepted as an oral presentation, it may be accepted as a scientific poster instead. The final determination on presentation format is at the discretion of the Workforce on Annual Meeting.
- Presenting authors for each abstract (oral and poster) and/or surgical video must attend and be able to present in person during the STS Annual Meeting (or via the virtual platform required by STS, if the Society determines that in person presentations will not take place and a virtual presentation will be used instead). In the event of extenuating circumstances in which STS requires in-person presentations but a presenter is unable to attend the Annual Meeting and is also unable to secure a co-author to present on his or her behalf, the presenter may submit a written request to the Chair of the Workforce on Annual Meeting for permission to make a virtual presentation.
- Unless it is submitted as a late-breaking promissory abstract, no abstract that contains deferred outcomes data will be considered for program inclusion. If data are to be presented, they must appear in summary form from within the original abstract submitted. If there are any questions regarding changes in data after the abstract has been submitted, it is the responsibility of the presenting author to notify STS of this by e-mail at education@sts.org.

Required Submission to The Annals of Thoracic Surgery

- For each abstract that is presented orally during the STS Annual Meeting, a corresponding manuscript must also be submitted to *The Annals of Thoracic Surgery* for publication consideration before or at the time of the meeting. Authors must submit manuscripts separately via *The Annals* manuscript submission system (www.editorialmanager.com/annals). All manuscripts shall become the property of the Society. Publication of all manuscripts in *The Annals of Thoracic Surgery* is not assured. If a manuscript is not submitted to *The Annals* prior to or at the time of the STS Annual Meeting, a 2-year period of ineligibility for participation in the STS Annual Meeting will be imposed upon each author of that manuscript. The Editor of *The Annals* at his or her sole discretion may provide the author(s) with an extension of time in which to submit the manuscript when unusual circumstances are presented. The same 2-year sanction rules apply to each abstract returned for revision that is not resubmitted within 12 months of the request for the revision. Notwithstanding the foregoing, in unusual circumstances the STS Board of Directors or Executive Committee may waive the requirement that authors of an abstract accepted for presentation at the STS Annual Meeting submit a corresponding manuscript to *The Annals of Thoracic Surgery* for publication consideration. Requests for such waivers must be submitted in writing to the STS Secretary, and may be granted subject to certain terms and conditions.
- Only unpublished work that has not previously been presented is allowed. The submitting author must attest that the material has not been presented or published elsewhere, will not be presented or published after submission and prior to notification of acceptance or rejection, will not be presented elsewhere if accepted for the scientific program, and subject to any waiver granted pursuant to the terms of this policy will not be published elsewhere if accepted for publication in *The Annals of Thoracic Surgery*.
- If there is any conceivable question regarding similarity to earlier work or possible duplication or redundancy (whether compared to previously or prospectively presented or published material), it is the responsibility of the presenting author to consult directly with the Chair of the Workforce on Annual Meeting. If there is a potential conflict with an abstract or surgical video already presented or published, authors must notify STS by e-mail (education@sts.org) of the conflict at the time of submission. Failure to comply will result in the abstract being rejected.