

EDITORS' PAGE



JACC: Case Reports

New Era of Clinical Cases, Bridging Patients With Guidelines



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In June, we were very proud to have launched our newest journal, *JACC: Case Reports*, under the *JACC* family of journals. *JACC: Case Reports* is an open access journal serving as a forum for promoting clinical cases and clinical problem solving. It will accept everyday educational or rare clinical cases that are well-described and with clear learning objectives. Furthermore, *JACC: Case Reports* aims to serve as a publication vehicle for early-career cardiologists and members of the cardiovascular care team, as well as a forum for mentorship on the review and publication process. We have sought to create a multidimensional journal that will be attractive not only for the general cardiologist, but also for the cardiothoracic surgeon, the anesthetist, and nurses and allied health professionals.

Furthermore, our aim is to address all stages of the professional career, which is why we divide the cases according to the level of expertise. Levels from *Beginner* to *Intermediate* to *Advanced* ensure that all clinicians who care for cardiovascular patients—from fellows-in-training through senior colleagues—can benefit from *JACC: Case Reports*.

Clinical Cases, Case Reports, or Clinical Case Series should focus on the clinical presentation of the patient, patient management, differential diagnosis, or treatment. There should be educational value associated with current guideline-recommended practice. From clinical manifestations and interventional approaches to global health implications, clinical cases should provide guidance on how to manage a patient in clinical practice, regardless of whether the condition is rare or common. To help the authors appropriately write a clinical case, we suggest a specific structure simply to organize their writing and organization—which also helps the readers.

It is important to expand on differential diagnoses and link your clinical case with clinical practice guidelines or position papers. Furthermore, a crucial part of the case is the learning objectives, through which the audience will learn more.

An important part of *JACC: Case Reports* is the continuing medical education section, which translates into Heart Care Team/Multidisciplinary Team Live. This represents step-by-step emergence of information/developments in clinical practice and describes how clinicians/clinical care teams reason and respond in each iteration. Most often, the format will be an active discussion of all members of the team in the presentation of questions and answers.

Within the Global Health Reports section, we encourage reports of global health cases and medicine practiced in unique settings, typically developing countries, and focusing on humanitarian work, refugee health, conflict, humanitarian aid, telemedicine and e-health, and health innovations. Global Health Reports should focus on initiatives or programs that can have an effect on individual patient lives, especially for underserved communities.

JACC: Case Reports also offers the opportunity to publish an interesting stand-alone image or electrocardiogram with a 500-word commentary as an Imaging Vignette or ECG Challenge. These vignettes include clinical images of interesting or rare clinical entities, including multimodality imaging or interventions or even electrophysiology/devices, with brief explanatory text.

We felt that the scope of *JACC: Case Reports* would be incomplete if we did not address the well-being of the physician, patient, and caregiver. That is why we initiated Voices of Cardiology, wherein through the stories of everyday life, we learn more about complex considerations that we face in the workplace or in our lives. Colleagues have sent us their life stories of

burnout, mental health issues, discrepancies, and dilemmas within the sensitive balance of work versus life. Fellows-in-training can also submit to the Voices of Cardiology section on topics such as mentoring, communication skills, and everything that a caregiver in their career stage should be aware of. We believe in investing in young colleagues, and we wish to hear their opinions and encourage them to raise their voice toward a better medical profession.

We would like to thank you for the warm welcome and the sheer number of submissions we have received. We promise that this journal will be a

growing platform of mentoring between junior and senior colleagues; we will learn from you and your patients, and we hope that we will be able to teach through *JACC: Case Reports* and its electronic platform.

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