

ENTITY	NUMBER
American Heart Association	
MANUAL	EFFECTIVE DATE
Policy and Procedure – Scientific Publishing	10/03
SUBJECT	REVISED
Disclosure – Conflict of Interest Procedures	10/2004; 5/2005; Reviewed 8/2009;
Disclosure - Commict of Interest Procedures	Revised 03/2011,
	04/2011, 10/2011,
	11/2011, 02/2019,
	05/2020, 05/2022

#### 1 PURPOSE

In accordance with the American Heart Association's (AHA) Relationship Disclosure and Conflict Resolution Policy (RDCRP), these procedures exist to provide guidance on the disclosure and management of conflict of interest (COI) for editors, authors, reviewers, and editorial staff involved in the submission, review, selection, and publication of articles in AHA scientific journals, both print and online, excluding American College of Cardiology (ACC)/AHA guidelines, AHA statements/advisories/guidelines, and any joint statements/guidelines that AHA may develop with non-ACC organizations.

#### 2 **DEFINITIONS**

Role	Definition
Editor-in-Chief (EIC)	Complete responsibility for content of journal. Always a volunteer scientist.
Deputy Editor	Second in command to EIC. Assumes role of EIC, if EIC cannot perform job.
Associate Editor	Assists EIC in review and decision making of journal content. Appointed for areas of scientific expertise.
Guest Editor	Serves as a surrogate to the EIC by handling papers that the EIC cannot because of a conflict. Independent decision-making authority for a manuscript, are not contracted as Associate Editors, and have no actual or perceived conflict of interest with manuscripts they are handling.
Editor	Generic term for Editor-in-Chief, Deputy Editor, Associate Editor, Assistant Editor, or Guest Editor.
Collaborator	Any colleague, scientific mentor, or student with whom the Editor is currently conducting research or other significant professional activities.

#### 3 **REQUIREMENTS**

3.1 All AHA journals shall use these procedures with regard to COI disclosure for authors, reviewers, editors, and editorial boards. The language pertaining to these requirements shall be the same across the journals in the appropriate written instructions, letters, online instructions, etc.

All policies are available online at AHAjournals.org.

- 3.1.1 The AHA RDCRP is available here:

  <a href="https://www.heart.org/en/about-us/statements-and-policies/conflict-of-interest-policy">https://www.heart.org/en/about-us/statements-and-policies/conflict-of-interest-policy</a>
- 3.1.2 The AHA Relationship Disclosure and Conflict Resolution Procedures document is available here:

  <a href="https://www.ahajournals.org/pb-assets/AHARelationshipDisclosureConflictResolutionProcedures.pdf">https://www.ahajournals.org/pb-assets/AHARelationshipDisclosureConflictResolutionProcedures.pdf</a>

#### 3.2 **For Editors:**

- 3.2.1 During the selection of an Editor or Editor-in-Chief, the AHA advises candidates that they must comply with AHA's RDCRP and Scientific Publishing procedures.
- 3.2.2 Editor-in-Chief candidates are required to complete a Relationship Disclosure Questionnaire that will be reviewed by the Scientific Publishing Conflict of Interest Review Committee before being appointed and on an annual basis. By virtue of their positions, Editors-in-Chief must be especially sensitive to the issue of actual or perceived COI and must be especially rigorous in acting to avoid them.
- 3.2.3 Editors are required to complete a Relationship Disclosure Questionnaire on an annual basis. During staff review of these forms, any declared conflicts of significance by Editors are brought to the attention of the Editorin-Chief. Disclosures by Editors are retained by the AHA.
- 3.2.4 To avoid actual or perceived COI:
  - 3.2.4.1 Original research manuscripts authored or coauthored by the Editor-in-Chief and/or any of the Associate Editors are handled by a Guest Editor. The Guest Editor makes all decisions about the manuscript, including choice of referees and ultimate acceptance or rejection. The entire process is handled confidentially.
  - 3.2.4.2 All manuscripts submitted from the Editor-in-Chief's home institution are also handled by a Guest Editor.
  - 3.2.4.3 Manuscripts from an Associate Editor's institution can be handled by the Editor-in-Chief or another Associate Editor as long as those individuals are not from the same institution.
  - 3.2.4.4 Original research manuscripts authored or coauthored by a collaborator who has published with the Editor-in-Chief within 3 years at time of submission will be handled by a Guest Editor.
  - 3.2.4.5 Original research manuscripts authored or coauthored by a collaborator who has published with an Associate Editor within

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- 3 years at time of submission cannot be handled by that Associate Editor.
- 3.2.4.6 Coauthors on government or society-initiated guidelines and scientific statements will not be, for the purpose of this procedure, considered collaborators.
- 3.2.4.7 The Editor-in-Chief may refer a manuscript to a Guest Editor to avoid a real or reasonably perceived COI. In all such cases, the Guest Editor shall make all decisions about the manuscript (including choice of referees and ultimate acceptance or rejection). The entire process is handled confidentially.

#### **Example Scenarios:**

- **A)** Editor-in-Chief is from institution Alpha. Original research manuscript is submitted and one of the manuscript authors is from institution Alpha.
  - Manuscript should be handled by a Guest Editor from a different institution. The Guest Editor should make all decisions (see 3.3.4.7).
- **B)** Editor-in-Chief was an author on an ACC/AHA guideline. A coauthor from that guideline submits an original research manuscript to the journal. The Editor-in-Chief and author have not jointly worked together on anything else in the past 3 years.
  - This is not considered a conflict for the purposes of this procedure, and the Editor-in-Chief can handle this manuscript (see 3.3.4.7).
- **C)** A collaborator of an Associate Editor submits an original research manuscript to the journal. This author and the Associate Editor published a study together 2 years ago.
  - An Editor who is not a not collaborator with the author must handle this manuscript (see 3.3.4.7).
- **D)** An Associate Editor is at institution Beta. An author from institution Beta submits an original research manuscript.
  - An Editor from a different institution must handle the manuscript (see 3.3.4.7).
- E) An Editor-in-Chief or Associate Editor sits on a project steering committee. A project collaborator who has not published with the Editor-in-Chief or Associate Editor submits a manuscript related to the project steering committee or the topic of the committee.

A nonconflicted Editor must handle the manuscript (see 3.3.4.7).

#### 3.3 For Authors:

3.3.1 An Authorship Responsibility and Copyright Transfer Agreement form or Open Access license agreement must be completed by **all authors**. All authors must also complete and sign the COI Disclosure Questionnaire. The AHA has adopted the International Committee on Medical Journal Editors (ICMJE) Conflict of Interest disclosure form for authors (Appendix). Each author is required to complete the ICMJE COI form.

If an author has no conflicts to declare, they must indicate **None**.

- 3.3.2 Additionally, authors **must** disclose all financial and nonfinancial relationships that could be perceived as actual or perceived COIs. COI disclosures will be published in the Disclosures section, which appears after the Acknowledgments section, in the accepted article.
- 3.3.3 The Acknowledgments section in the accepted article recognizes the substantive contributions of individuals:
  - 3.3.3.1 Authors **must** provide written permission/approval from all individuals mentioned by name in the Acknowledgments section of the manuscript.
  - 3.3.3.2 Authors **must** completely spell out all grant funding agency abbreviations, with the exception of the National Institutes of Health.
- 3.3.4 The Sources of Funding section in the accepted article recognizes all sources of research support (including commercial or institutional support).

#### 3.4 For Reviewers:

- 3.4.1 AHA journals shall require a COI disclosure from potential reviewers of any manuscripts. This requirement will be incorporated into the language and procedures of the online manuscript submission and peer review system used by all of the journals. As well, a link to the full details of the AHA policies and standards will be available from the online manuscript submission and peer review system. A standard statement is as follows:
  - 3.4.1.1 Please advise the editorial office in your reply of any relevant relationship that might be reasonably perceived as a real or potential conflict of interest that could potentially influence or bias your review of this manuscript. While most relationships are not disqualifying, if you believe that you have a disqualifying conflict of interest, financial or otherwise, including a recent collaboration with the authors (within the past 3 years), please contact the editorial office immediately. A relationship is "relevant" if the relationship or interest relates to the topic of the manuscript in terms of any of the following: the same or similar subject matter or topic; the same, similar or competing drug or device, product or service, intellectual property or asset; a drug or device company or its competitor; or has the reasonable potential to result in financial, professional or other personal gain or loss for you, members of your household or employer.
  - 3.4.1.2 A recent collaboration that needs to be disclosed is defined as coauthoring a manuscript or any other professional relationship

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(eg, served as a mentor or joint grant holders) with the authors of the present manuscript within the previous 3 years at the time of submission.

#### APPROVALS:

SPC COI Subcommittee: 10/03

Scientific Publishing Committee: 10/03, 11/11, 02/2019, 05/2020

# Appendix: International Committee on Medical Journal Editors (ICMJE) Conflict of Interest Disclosure Form for Authors

Date:	
Your Name:	
Manuscript Title:	
Manuscript number (if known):	

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)  Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)  planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.	None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	

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4	Consulting fees	None	
5	Payment or honoraria for	None	
	lectures, presentations, speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
	testimon,		
7	Support for attending	None	
<b>'</b>	meetings and/or travel	None	
	l meetings and/or traver		
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	None	
10	in other board, society,	None	
	committee or advocacy		
	I		
44	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
			•

Please place an "X" next to the following statement to indicate your agreement	o indicate vour agreement	statement to	' next to the followin	'lease place an "X"	P
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 I certify that I have answered every question and have not altered the wording of any of the questions on this
form.