Backed by more than fifty years of editorial excellence...

*Medicine Today* (formerly *Modern Medicine*) has been continuously published in Australia since 1957. Its publishers launched *Cardiology Today* to provide a topic-specific, focused publication for GPs that will also be of interest to cardiologists and endocrinologists. *Cardiology Today* delivers a dedicated cardiology environment to showcase products directly to a targeted audience.

Written by cardiologists and other specialists for a GP audience, the peer reviewed editorial content provides authoritative, practical clinical information and is commissioned following discussions with the Editorial Advisory Board and other senior consultants. All invited authors hold senior roles in their respective fields of medicine.

The specialty of cardiology is changing rapidly, with new information, research and products constantly becoming available to GPs. *Cardiology Today* brings the most important clinical information to the forefront of doctors’ minds in a quarterly peer reviewed publication devoted to cardiology.

From the Editor-in-Chief...

What is *Cardiology Today* about and why does it matter to both GPs and cardiologists?

Despite the fact that cardiovascular disease remains the number one cause of mortality in Australia, improvements in acute care mean more patients are surviving cardiac events. The number of patients with chronic cardiovascular conditions is likely to increase as our population ages, accompanied by an increasing prevalence of obesity, diabetes and associated vascular complications.

Our patients are provided with a proliferation of both interventional and medical therapies for the prevention and treatment of myocardial, coronary, valvular and arrhythmic diseases.

Keeping up with developments in acute and chronic cardiovascular conditions challenges all of us who engage in frontline patient care.

*Cardiology Today* is designed to help the Australian GP readily access up-to-date clinically relevant information prepared by experts across all domains of cardiovascular disease. The articles are easy to read and have been carefully reviewed by an editorial board of cardiologists and GPs, as well as other specialists outside the editorial board, to ensure the tone and content meet the busy practitioners’ needs. The articles include content focusing on acute care, ECG interpretation and clinical case studies covering diagnosis and management of common and less common but interesting conditions. Our goal is to provide primary healthcare professionals with an understanding of the latest developments in cardiovascular disease, and to support and enrich their daily practice.

Professor David Brieger
MB BS, PhD, FRACP, FACC
Editor-in-Chief and Chair of the Editorial Advisory Board, Cardiology Today

**Biography**

Professor David Brieger is an interventional cardiologist and Head of Coronary Care and Coronary Interventions at Concord Hospital, and Professor of Cardiology at the University of Sydney. His particular clinical interests include coronary disease and atrial fibrillation and he practices across the full spectrum of cardiac disease. He maintains an active research interest in new antithrombotic drugs for cardiac conditions and the promotion of high quality care for patients during and following their hospitalisation.
What makes up an issue of Cardiology Today?

**Features** – Peer reviewed, commissioned, in-depth reviews of practical clinical information on cardiology

**Perspectives** – Shorter pithy articles on specific cardiology issues

**Case studies** – Discussions of cases typically presenting in general practice

**ECG education** – A case-based approach to illustrate the importance of ECG knowledge

**GP emergency management** – A case-based look at cardiac emergencies presenting in general practice

**Briefings** – News stories from international research journals, with local commentary

What our peer review process means to you...

Providing accuracy, credibility and independence, the peer review process is an indispensable part of Medicine Today’s editorial process. Borrowing from this proven method, every article published in Cardiology Today has been rigorously peer reviewed by two expert consultants and by one GP, who represents our main readership.

The reviewers provide instructive comments, suggestions and recommendations on the suitability for publication of each article. Authors receive detailed reports requesting revisions and responses to the comments before articles are accepted for publication.

The result is a consensus on each cardiology topic – meaning you can be sure your product message is delivered in the most credible, authoritative environment available to reach your target audience.

Every article is a basis for action, providing doctors with the most relevant, insightful and accurate consensus information achievable.

Editorial Advisory Board ... behind the scenes

Having major input into Cardiology Today’s peer review process, commissioning program and author suggestions, the Editorial Advisory Board has a vital role in maintaining the journal’s high editorial standards. The Board comprises key cardiologists (interventional, subspecialist, general/rural), a cardiothoracic surgeon and GPs as its members.

Single article reprints

At Medicine Today we know that doctors trust information from authoritative, credible and independent sources and that this influences their opinions and prescribing habits.

Single article reprints are available from all Medicine Today titles, including Pain Management Today, Endocrinology Today and Cardiology Today.

Distribution

Delivery takes 5-10 working days from final approval. Reprints are delivered in bulk to client for their own distribution.

Advertising

FP advertising is allowed where space is available. Size of reprint can increase to include ads, where possible. Sponsor acknowledgement is on front cover, in addition to standard disclaimer at end.

Pricing

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All prices exclude GST and are not media commissionable. Larger quantities can be quoted on request.
Booking & Material Deadlines 2018

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<td>05 March</td>
<td>07 March</td>
</tr>
<tr>
<td>October</td>
<td>31 August</td>
<td>04 September</td>
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Circulation

- GPs: 22,894
- Cardiologists: 781
- Endocrinologists: 460
- Miscellaneous subscribers: 553
- Advertisers/agencies: 613

TOTAL = 25,301

4 Colour Display Advertising 2018

All quoted rates are GST exclusive

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* 1/2 and 1/3 page horizontals are available as nonbleed ads only, except when purchased as double page spreads.

Position Loadings

IFC, OBC an additional $2120 (ex GST)
Note: where IFC is booked as spread, loading applies on second page only, i.e. an additional $2120.

Impact Advertising Options

For extra impact for a launch or a special message, Cardiology Today offers you several high visibility advertising and promotional opportunities to increase brand awareness:

- Cameo advertisements: $1620
- Belly wrap – GPs*: $21,380
- Belly wrap – Full run*: $26,530
- Belly fold – GPs*: $28,010
- Belly fold – Full run*: $33,160
- Cover gatefold – GPs*: $30,450
- Cover gatefold – Full run*: $35,600
- False Cover – GPs* + OBC FP †: $26,570
- False Cover – Full run* + OBC FP †: $28,320
- Fixed inserts (65% of applicable FP 4colour rate per page)

*Price includes printing
†False cover must include FP on OBC

Trading Terms

Agency commission of 10% is paid to advertising agencies for all accounts settled within 30 days from the end of the month of invoice.

e-Newsletter advertising

M-rec advertising space is available on Cardiology Today’s quarterly electronic Table of Contents (eTOC) in each relevant month.

More than 15,435 registered users have opted in to receive email communications, with average open rates of 20 to 25%.

Sponsorship of 1 m-rec in 1 eTOC is $1460 (ex GST).

Advertising Standards

Advertisements submitted to Cardiology Today are subject to editorial approval and have no influence on editorial content or presentation. Advertisers are responsible for ensuring that advertisements comply with Commonwealth and State and Territory laws and any industry code of conduct.

Editorial Policy

Cardiology Today is a peer reviewed clinical journal and the editorial content is completely independent of advertising. All editorial material is embargoed before publication.
Mechanical Specifications

Cardiology Today prefers ad material via Quickcut, a service provider for electronic delivery of digital files that has proven to be the most effective method of receiving and tracking your ad. As Quickcut provides the facility to check for errors, Cardiology Today recommends that you use this service to avoid print errors.

Material delivery
• Quickcut – visit www.quickcut.com.au for more information
• Via email (up to 15 MB only) to: prueanderson@medicinetoday.com.au
  maria@medicinetoday.com.au

Material instructions
• Publication name (Cardiology Today)
• Issue date
• Key number
• Ad size
• Special instruction/positioning

Electronic File Requirements (Hi-res Acrobat PDF only)
Hi-res PDFs must be supplied with a minimum of 3 mm bleed and visible crop marks. Colour bars, crop marks and registration marks must be at least 5 mm away from trim.

CHECK LIST
Screen
• Four colour – 133 lines per inch

Colour
• Hi-res PDFs must be supplied in CMYK
• RGB, PMS and Spot colours must be converted to process colour
• Total ink weight should not exceed 310% with a 90% black maximum

Images
• CMYK
• JPG or TIFF format
• Hi-resolution required, minimum of 300 dpi at 100% scaling
• Black and white line art, minimum 1200 dpi at 100% scaling
• All transparencies must be flattened

Booking and delivery of material:
Prue Anderson, Group Sales & Marketing Manager
Therese Dahlström, Sales & Marketing Co-ordinator
Cardiology Today
2/36 Bydown Street, Neutral Bay NSW 2089
PO Box 1473, Neutral Bay, NSW 2089
Telephone: 02 9908 8577
prueanderson@medicinetoday.com.au
theresedahlstrom@medicinetoday.com.au

Type
• Postscript fonts or outline fonts should be used – do not use TrueType fonts
• All fonts should be embedded
• All live copy must be kept 10 mm from all edges
• Any type less than 10 pt bold is not suitable for reverse printing
• Body copy text that is black should be set to 100% black, not a 4 colour makeup of black
• Solid black background areas should have an additional 30% of cyan tint to provide additional density

Proofs
• Supply a 3DAP digital colour proof of the artwork at 100%. Note. Cardiology Today cannot be held responsible for colour discrepancies in print if there are inaccuracies in electronic files supplied to us or if an industry standard proof is not provided. If further technical information is required, visit: www.3dap.com.au

Although the internal production process may verify that material is within specification, the onus is placed firmly on the tradehouse/sender to supply material to specification. It is also a requirement that advertising material is delivered on time so quality control measures can take place. Late material may miss these checking procedures that could pick up possible problems/ errors.

Important Notes for Designers of Double Page Spreads (DPS) – Saddle Stitched
• DPS must be supplied as two single pages, left and right
• Include 3 mm bleed on all edges
• Avoid running type across the gutter on a DPS
• Spacing of letters in headings or large text should clear the gutter
• All live copy must be kept at least 10 mm from outer edges

Type
AVOID RUNNING TYPE ACROSS GUTTER

DPS Template

All live copy should be 10 mm from all edges
253 mm x 192 mm

Spine trim

3 mm Bleed all edges
**Journal Size**

Trimmed size is 273 mm deep x 207 mm wide, saddle stitched. Include 3 mm bleed on all edges. All live copy must be kept at least 10 mm from outer edges.

**Advertisement Sizes**

See list of ad sizes on this page. Other sizes may be available upon application.

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### Ad sizes

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* Not available for PI
† Available as nonbleed ad only, except when purchased as a spread
‡ Available for PI only