K. Whelton, MB, MD, MSc, Show Chwan Professor of COVID-19 infection or severe/fatal complications, “angiotensin-aldosterone system (RAAS) inhibitors and randomized controlled trials. Overall, they are quite nin-angiotensin-aldosterone system antagonists such upregulate the same receptor that the virus is using to RAAS antagonists continue to take them. Association, the European Society of Cardiology and search has demonstrated success of PCSK9 inhibitors have shown similar promise in early studies. Other re-Agents in development such as inclisiran (Novartis) may not respond to maximally tolerated statin therapy. to FDA approval and potential benefi/tes in addressing residual risk, which led cepea, Amarin) and bempedoic acid (Nexletol, Esperion effectiveness of new agents such as icosapent ethyl (Vas-ling LDL does not always control CVD risk, and because the use of therapies including PCSK9 inhibitors, statins re-duced ejection fraction with and without type 2 HF hospitalization in patients with HF with re-/f_i nderings Pate-nents: random, parallel, single-blind DESIGN: CHOW NOW Dapagli/f_l  ozin (Farxiga) is the /f_i irst SGLT2 in-continues on page 7
Black-and-White rates: CARD DEMO Black-and-white Rates:

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<th>3/4 Page</th>
<th>Island/Half Page</th>
<th>1/3 Page</th>
<th>1/4 Page</th>
<th>1/8 Page</th>
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CARD DEMO Color Rates:

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<thead>
<tr>
<th>Charge per color per page or fraction</th>
<th>Standard color</th>
<th>Matched color</th>
<th>Metallic color</th>
<th>Four color</th>
<th>Four color + PMS</th>
<th>Four color + Metallic</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$800</td>
<td>$880</td>
<td>$1,200</td>
<td>$2,290</td>
<td>$3,175</td>
<td>$3,485</td>
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</tbody>
</table>

3. Continuity Discount: Advertisements for an individual product are eligible for a discount based upon the number of issues in which they advertise. Issue insertions do not need to be consecutive. This program may not be combined with the New Advertiser Discount or Free Ad Program.
   a) 3 issues = 5% off
   b) 6 issues = 15% off
   c) 12 issues = 25% off

4. Free Ad Program: Buy 5 ads get 1 free. Purchase 5 ads and receive a 6th ad of equal or lesser size free. May not be combined with Continuity or New Advertiser Discounts.

5. Prescribing Information Discount: B&W prescribing information (PI) pages are eligible for the following discount. The 3rd page of PI and after may take a 50% discount off the earned rate.

6. Clinical Trial Ad Buy One, Get One Free: Clinical trial advertisements may run a second insertion of the same ad unit in any issue for no charge. Ad creative must promote participation in a current clinical trial. Corporate and/or disease state advertisements are not eligible. May not be combined with other Continuity, Free Ad or New Advertiser Discounts.

7. Multichannel Program: Custom multichannel programs are available that meet your specific advertising needs. Contact your Sales Representative to discuss options.

8. Corporate Discount: Total net spend achieved in the year 2021 will set a Corporate Discount to be taken off 2022 advertising.

9. When taking advantage of more than one discount program, discounts must be taken in the following order:
   a) Less New Advertiser/Product or Continuity Incentive
   b) Less Healiio Strategic Solutions Corporate Discount Program
   c) Less 15% Agency Discount

Equals net cost

ISSUANCE AND CLOSING

1. Established: February 1998
2. Frequency: 12 times per year
3. Issue Dates: 1st of the month of issue
4. Mailing Dates & Class: Mails within the issue month; Periodical Class.
5. Extensions and Cancellations:
   a) Extensions: If an extension date for material is agreed upon and material is not received by the Publisher on the agreed date, the advertiser will be charged for the space reserved.
   b) Cancellations: If, for any reason, an advertisement is canceled after the closing date, the Publisher reserves the right to repeat a former ad at full rates. If the advertiser has not previously run an ad, the advertiser will be charged for the cost of space reserved. Neither the advertiser nor its agency may cancel advertising after closing date.

6. General Editorial Direction: CARDIOLOGY TODAY delivers the most up-to-date news in the field of cardiology. The newspaper provides timely coverage of scientific meetings and events, with special emphasis on coronary heart disease, electrophysiology and arrhythmias, interventional cardiology including catheterization, myocardial disorders and cardiovascular pharmacology. In addition, the newspaper provides news about the latest legislative and regulatory developments affecting the practice of cardiology.

7. Average Issue Projection:
   a) Average Number of Articles per Issue: 30
   b) Average Article Length: 21 inches
   c) Editorial Sections:
      - News Articles
      - Cover Story
      - Device of the Month
      - Commentary
      - In the Journals
      - Meetings and Courses

8. Origin of Editorial:
   a) Staff Written: 85%
   b) Solicited: 10%
   c) Submitted: 5%
   d) Articles from Meetings: 75%
   e) Peer Review: No.

CIRCULATION

1. Description of Circulation Parameters:
   a) Cardiovascular Diseases
   b) Pediatrics, Cardiology
   c) Interventional Cardiology
   d) Cardiac Electrophysiology
   e) Internal Medicine

2. Demographic Selection Criteria:
   a) Prescribing: NA
   b) Circulation distribution:
      Controlled: 99.88%
      Paid: 0.12%
      Request (non-postal): 0%
   c) Paid Information:
      Association members: NA
      Is publication received as part of dues?: No
   d) Subscription rates: U.S.: $391/yr individual; Canada: add 5% GST; Outside U.S.: add $92/year

3. Circulation Verification:
   a) Audit: BPA Worldwide
   b) Mailing House: LSC Communications

4. Date and source of breakdown: BPA Worldwide, July 2020

5. Estimated total circulation for 2021: 53,905
**GENERAL INFORMATION**

1. **Requirements for Advertising Acceptance:**
   Advertisements for professional and non-professional products or services are accepted. They are in harmony with the policy of service to the healthcare profession and subject to Publisher's approval. Non-professional product and service advertisers must submit ad copy 2 weeks prior to closing date.

2. **New Product Releases:** Yes

3. **Editorial Research:** Yes

4. **Ad Format and Placement Policy:**
   a) Format: Within articles
   b) Are ads rotated? Yes

5. **Ad/Edit Information:** 50/50 Ad/Edit Ratio

6. **Value-Added Services:**
   a) Bonus Convention Distribution: See Editorial Calendar
   b) Other: Advertiser Index

7. **Online Sponsorship Opportunities:** Contact your sales representative.

8. **Additional Advertising Opportunities:**
   a) BRC inserts: See 5b, under Insert Information for specifications.
   b) Split-run advertising. Contact publisher for information.

9. **Reprints:** Yes, email: scsreprints@sheridan.com

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**INSERT INFORMATION**

1. **Availability and Acceptance:**
   a) Availability: Two- to eight-page inserts are available full run. Demographic and/or geographic inserts are limited to three per issue. Short-cut or gatefold inserts are accepted.
   b) Acceptance: A paper and insert sample must be submitted to the Publisher for approval.

2. **Insert Charges:**
   a) Furnished Inserts: Billed at the earned black-and-white space rate. Commissionable.
   b) A-size inserts charged at Island half-page rate.
   c) Tabloid-size inserts charged at the King page rate.

3. **Sizes and Specifications:**

<table>
<thead>
<tr>
<th>No. of Pages</th>
<th>Max Paper Stock</th>
<th>Min Paper Stock</th>
<th>Max Micrometer Reading</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 page (one leaf)</td>
<td>80# coated text</td>
<td>70# coated text</td>
<td>.004&quot;</td>
</tr>
<tr>
<td>4, 6, 8 page</td>
<td>70# coated text</td>
<td>60# coated text</td>
<td>.004&quot;</td>
</tr>
</tbody>
</table>
   a) Full size inserts: supplied untrimmed, printed, folded (except single leaf), and ready for binding. Varnished inserts are acceptable at the Publisher's discretion.
   b) A-size: Supply size: 8" x 11" pre-trimmed on head and face. Half" foot and gutter grind.

4. **Trimming:** Trimming of oversized inserts will be charged at cost. Keep live matter 1/2" from trim edges and 1/4" from gutter trim. Inserts are jogged to the foot. Book trims 1/4" at head face and foot.

5. **BRCs:**
   a) Pricing: Contact your Sales Representative for prices. Non-commissionable.
   b) BRC Specifications: 3½" x 5" minimum to 4½" x 6" maximum; perforated with ½" lip (from perforation) for binding. Add ½" for foot trim. Cardstock minimum: 75# bulk or higher.

6. **Quantity:** Full run − 60,000, CARD Demo 35,000 (estimated). Exact quantity will be given upon Publisher's approval of insert or call Publisher prior to closing date.

7. **Shipping:** Carton packing must have publication name, issue date, and insert quantity clearly marked. Inserts shipped in e-containers cannot be verified and Healio Strategic Solutions will not be responsible for shortages on press. Make sure all pieces are oriented the same way in the carton (all facing the same direction). Do not include slip sheets in between pieces or shrink wrap in bundles. Additional costs will be incurred if hand work is necessary to remove slip sheets and/or shrink wrapping.

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**AD SPECIFICATIONS**

1. **Available Advertising Unit Sizes:**

   For spread ads, keep content (images/text) ¼" in on each side of the gutter. For bleed ads, add ½" on all sides of trim size.

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**ADDITIONAL INFORMATION**

2. **Type of Binding:** Saddle-stitch or Perfect bound

3. **Print Ad Requirements:** For specifications, go to: healio.com/adspecs
   - **Color Proofs:** One proof made from supplied files and meeting SWOP specifications, must be provided with data file. Proof must be at 100% of the print size. Publisher accepts Kodak approvals, Matchprints, Chromalins, High-end Epson Quality or Iris Digital proofs.
   - **If only color lasers are furnished, color match on press cannot be guaranteed.**
   - **Note:** Spread ads should be sent as a one-page file.

4. **Disposal of Ad Material:** Ad materials will be held one year from date of last insertion and then destroyed unless notified otherwise in writing.
<table>
<thead>
<tr>
<th>ISSUE</th>
<th>AD CLOSING</th>
<th>MATERIAL DUE</th>
<th>FEATURED TOPICS</th>
<th>MEETING COVERAGE</th>
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<tbody>
<tr>
<td>January</td>
<td>12/1/2020</td>
<td>12/16/2020</td>
<td>2020 Drug and Device Update</td>
<td>National Lipid Association</td>
</tr>
<tr>
<td>February</td>
<td>1/4/2021</td>
<td>1/20/2021</td>
<td>Vascular Medicine and Intervention</td>
<td></td>
</tr>
<tr>
<td>March</td>
<td>2/1/2021</td>
<td>2/18/2021</td>
<td>Cardiac Amyloidosis</td>
<td>International Stroke Conference</td>
</tr>
<tr>
<td>April</td>
<td>3/1/2021</td>
<td>3/18/2021</td>
<td>Treatment and Management of Arrhythmia Disorders</td>
<td></td>
</tr>
<tr>
<td>May</td>
<td>4/1/2021</td>
<td>4/19/2021</td>
<td>Cardiometabolic and Lipid Disorders</td>
<td></td>
</tr>
<tr>
<td>June</td>
<td>5/3/2021</td>
<td>5/19/2021</td>
<td>Developments in Blood Pressure and Hypertension</td>
<td>Society for Cardiovascular Angiography and Interventions Heart Rhythm Society American College of Cardiology</td>
</tr>
<tr>
<td>July</td>
<td>6/1/2021</td>
<td>6/15/2021</td>
<td>Diabetes and the Heart</td>
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<tr>
<td>August</td>
<td>7/1/2021</td>
<td>7/19/2021</td>
<td>Stroke Prevention and Treatment</td>
<td></td>
</tr>
<tr>
<td>September</td>
<td>8/2/2021</td>
<td>8/19/2021</td>
<td>Issues in Cardiac Intervention</td>
<td></td>
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<tr>
<td>October</td>
<td>9/1/2021</td>
<td>9/20/2021</td>
<td>Tools for Cardiovascular Disease Prevention</td>
<td>European Society of Cardiology</td>
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<td>November</td>
<td>10/1/2021</td>
<td>10/20/2021</td>
<td>Diagnosis and Treatment of Myocardial Infarction</td>
<td>Cardiometabolic Health Congress Transcatheter Cardiovascular Therapeutics</td>
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<td>11/1/2021</td>
<td>11/16/2021</td>
<td>Heart Failure Therapies</td>
<td>American Heart Association</td>
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Note: Editorial content subject to change