



# AuntMinnie.com

Imaging Decisions Start Here<sup>SM</sup>

## AuntMinnie.com Content Contributor Guidelines

### ABOUT AUNTMINNIE.COM

Thank you for your interest in partnering with AuntMinnie.com for your radiology content! We are the largest and most widely read Internet-based portal for medical imaging professionals:

- Over 155,000 active members (members who have interacted with the site at least once in the last year)
- Over 98,000 subscribers to our daily Letter from the Editor e-newsletter
- Over 2 million page views per month to our flagship website, AuntMinnie.com
- Between 20,000 and 30,000 subscribers each to subspecialized e-newsletters on a variety of topics, such as CT, MRI, artificial intelligence, ultrasound, and women's imaging
- 42,000 radiologists registered as active members
- 15,000 radiologic technologists registered as active members
- Members from around the world

We have a variety of opportunities for radiology vendors, healthcare providers, and key opinion leaders (KOLs) to place their content on AuntMinnie.com. Please see below for the opportunity that best fits your objectives.

### Letter from the Editor (LFTE)

This is our regular email newsletter, it is sent on a daily basis Monday through Friday. We also send a Week in Review email on Saturday that includes all the content sent in the previous week.

### Communities

Most of our editorial content is segmented into specialized areas called Communities that represent different areas of radiology, such as artificial intelligence, CT, MRI, Ultrasound, etc. For a full list go to <https://www.auntminnie.com/index.aspx?sec=sup>.



## RADCast

We offer extensive daily coverage of major radiology conferences, such as the Radiological Society of North America (RSNA) and the European Congress of Radiology (ECR). For a list of our past RADCast coverage go to

<https://www.auntminnie.com/index.aspx?sec=cns&sub=sea&pag=cnf>.

## Social Media

Twitter: @AuntMinnie at [www.twitter.com/auntminnie](http://www.twitter.com/auntminnie).

Facebook: [www.facebook.com/auntminnie.radiology](http://www.facebook.com/auntminnie.radiology).

LinkedIn: <https://www.linkedin.com/company/auntminnie.com/>

Instagram: <https://www.instagram.com/auntminniecases/>

## Editorial Calendar

We don't really have one, but you'll tend to see certain topics emphasized around major radiology conferences, as follows:

February: HIMSS -- Healthcare IT

March: ECR -- All modalities

April: ARRS -- All modalities

May: ISMRM -- MRI

June: SIIM (imaging informatics), SNMMI (molecular imaging and nuclear medicine)

July: AHRA -- Hospital and imaging center management

September: ISCT (CT), SIIM Machine Learning (artificial intelligence)

September/October: ASTRO -- Radiation oncology

November/December: RSNA -- All modalities



## Sponsorship Opportunities

AuntMinnie.com offers a variety of opportunities for advertising and sponsorship, including banner ads, Community sponsorships, Vendor Connect, and sponsored emails. Please email [pdavis@auntminnie.com](mailto:pdavis@auntminnie.com) for more information.

## CONFERENCES AND CME COURSES

We offer listings of various conferences and CME courses scheduled around the world. We welcome submissions from course providers -- these can be posted to our Conference Calendar at <http://www.auntminnie.com/index.aspx?sec=cns&sub=sea&pag=cnf>

## KOL CONTENT

AuntMinnie welcomes feature-length articles by key opinion leaders (KOLs) and other industry experts. We do, however, have some guidelines we prefer our contributors to follow:

- Contributed articles should not be promotional toward any particular product, vendor, or customer.
- Articles should have an educational message of value to our readers -- i.e., "news you can use."
- It is acceptable for contributors to include contact information for our readers to reach them in the "About the Author" section of the article.
- Word length should be 800 to 1,200 words.
- Please include an "About the Author" section in your contribution, as well as a high-resolution head shot of the author.
- Please submit articles in 12-point Times New Roman font in either a Word document or Google Docs file.
- Please spell out most acronyms, beyond obvious ones like "CT" and "MRI." You can take a look at articles on our site to get a feel for our style.

## EDUCATIONAL CONTENT

AuntMinnie.com publishes daily educational content in the form of our Case of the Day feature -- this can be a great way to highlight a particular expertise, technology, or case.



We accept submissions of cases from third parties -- cases must have relevant high-quality images in JPEG format as well as questions that provide educational context for the pathology being discussed. Please send inquiries to [editorial@auntminnie.com](mailto:editorial@auntminnie.com).

## INDUSTRY COVERAGE

### Press releases

We are happy to run articles on industry press releases in the News in Brief section of our site. Please note that press releases will be edited to conform to our style and editorial guidelines.

### Deadlines

As AuntMinnie.com publishes continuously, we don't have any deadlines per se for press releases. In general, we try to publish articles on press releases within 24 hours of when they are issued.

### Wire Services

We monitor both BusinessWire and PR Newswire throughout the day, as well as other smaller newswires. If a release goes out over either of these wires, it's generally not necessary to send it to us directly.

### Where to Send Releases

If you want to send us a release directly, send it to [editorial@auntminnie.com](mailto:editorial@auntminnie.com). This goes to a number of AuntMinnie editors. If you send a release to an individual AuntMinnie staff person, there is the chance that a story on your release will be delayed if that person is out of the office.

### Release Format

We strongly prefer that press releases be sent via e-mail.

### What We Cover

- **New product launches:** We generally give preference to a completely new product over an upgrade to an existing product. We try to write about most software upgrades, but if we have a large volume of releases on a particular day, sometimes we may not be able to publish an article on a software upgrade.
- **Personnel changes:** We will usually write about personnel changes at the **VP level and higher**. Below the VP level, it depends on the significance of the appointment and the volume of news that day. Appointments of people who are recognized industry veterans will usually get coverage, even if it isn't at the VP level.



- **Financial news:** We will almost always write about quarterly financial results of public medical imaging companies. We will also write about financial results for privately held firms when they include real revenue and income numbers.
- **New product installations:** We will cover new product installations for most imaging companies. For new installations by the major OEMs, see separate section below.
- **Multiple new installations:** If a company has multiple installations occurring around the same time, we prefer that these be grouped into a single release. If a company is sending out multiple separate releases over a short time period (such as two or three in a week) on single installations, we may hold the releases and report on all of them with a single story.
- **Product sales milestones:** This might be the 1,000th scanner shipped, first scanner sold in a particular state, etc. Touting a product milestone that is a low number (fifth MRI scanner) is less likely to get covered.
- **Scientific or clinical research using a company's products presented in a journal or at a conference:** We don't always cover this, but sometimes will do so if it seems significant. Decisions are made on a case-by-case basis.
- **Regulatory clearances:** We will cover CE Mark and 510(k) clearances, as well as regulatory clearances in other countries.

## What We Don't Cover

- Financial results for private companies that don't include real revenue and income numbers.
- Really detailed financial information that's only of interest to an investing audience, such as converting debt to stock.
- Awards: This includes Frost & Sullivan or KLAS awards, or awards from local business or charitable organizations.
- Appointments to a company's board of directors (unless it is an individual who is very well-known to the radiology community).
- "Go live" articles -- such as a hospital going live with a company's PACS: We consider the announcement of the sale to be the newsworthy item -- the fact that the facility has gone live is a natural part of the installation process, so there isn't really anything newsworthy.



- We will not cover installations more than once -- for example, if we cover the initial contract for the sale of a system, we will not then also cover when the system is installed.
- Likewise, we will not report in separate articles on both a distributor and an OEM reporting on the sale of a system. We would cover that in a single article.
- "Impressions" articles, such as an imaging facility reporting its impressions or impact on its operations of a new PACS or modality scanner it has installed.
- Personnel news at imaging facilities and hospitals.
- Industry certifications such as ISO 9000 that don't have an impact on whether a company can start selling a product in a country.
- Vendors that are sponsoring CME or educational courses, even if in partnership with an educational institution. These should be posted to our Conference Calendar at <http://www.auntminnie.com/index.aspx?sec=cns&sub=sea&pag=cnf>.
- Meaningful Use (MU) attestations by individual imaging sites.
- Clinicians who conduct a new or different type of procedure with a company's product.
- Product introductions that are being shown to a new audience just a few months after the initial product launch -- for example, a product being launched to a European audience at ECR after being initially launched at RSNA.

## **OEM Product Installations**

Due to the large number of possible news items, we have some specific criteria for new product installation news from major multimodality vendors (GE, Siemens, Canon, Philips). We cover the following:

- The first commercial installation of a product that has recently received FDA clearance
- The first installation in a particular country or state
- The first installation of a new, upgraded version of an existing product
- A milestone installation such as the 100th or 1,000th system sold
- When a single-scanner installation is part of a larger research deal with a healthcare institution
- An installation that is part of a deal in which other modalities are also installed

Please note that the above guidelines do not apply to PACS and RIS installations. We will continue to cover individual installations in these areas.

*Last updated January 2019*