Call for Oral Presentations & Poster Abstracts

Submit Between 21 May - 19 July at:

www.acutemedicine.org.uk
The Conference is aimed at a multi professional audience and is targeted at those working in an acute hospital setting, both managerial and clinical. It will provide an excellent platform for multi profession discussion and debate as well as an opportunity to share, discuss, learn and hear about the different developments within Acute Medicine.

Call for Abstracts
We are inviting authors to submit an abstract for oral or poster presentation. Entries will be shortlisted and the best abstracts will be selected for inclusion within the oral presentation session on Friday 11th September; over 120 poster authors will be invited to display a poster at the conference. As in previous years, the poster exhibition will run throughout the meeting. Abstracts should be submitted online at:

www.acutemedicine.org.uk

Between
21 May and 19 July

One author for each poster will be required to register to attend for the meeting paying the delegate fee listed on the SAM website. Please do not submit an abstract if you are unable or unwilling to attend the meeting

Poster Categories are as follows:

- Service Organisation & Design
- Audit and Quality improvement
- Research
- Education
- Case Reports

Who Can Submit a Poster
Any health professional can submit an abstract related to Acute Medicine. We welcome submissions from all members of the multi professional team. Please ensure that your submission is linked to one of the categories listed above.

Submission Guidelines
The subject of the abstract should be of relevance to an acute medical audience. All abstracts should be original work. We encourage abstracts which highlight creative and innovative solutions to improve the quality and delivery of acute care.

Word Count
The online submission system will show a total word count of 400. The body of the abstract should be no longer than 300 words. A further 100 words is allowed for references and title.

In addition, you may include up to 2 diagrams/tables to illustrate the work further. These can be in any format up to 200kb in size. Abstracts which exceed the maximum length will be judged based on the first 300 words.

You will be required to submit the following information as part of your submission:

Aim
Highlight why the project was undertaken and what the goals of the work included. This section should include a clear question or objective of the work undertaken.

Methods
What methods were used to achieve this?

Outcomes/Results
What was achieved?
How were the achievements measured or tracked?
Conclusion
What do the above results mean for the service and patients?
Remember that the conclusion should reflect your stated aims and objective & results of study.

Case Reports
Case Reports do not need to follow the format for scientific abstracts. A good case report will provide a succinct summary of the case and a brief review of the topic. As long as this guidance is followed, authors are free to choose the formatting of a case report.

Tips for Submitting your Abstract
Abstracts must not exceed **300 words**, excluding title, author, references or contact details and must be in English. Abstracts which exceed this length will be judged on the first 300 words.

References are **not** included in the word count and should follow **Vancouver Convention**: name, title, publication, year, chapter, page number/s. (Maximum of 5 references)

Audits will usually only be accepted if the audit cycle has been completed following implementation of change.

A good abstract for a **service development** must evaluate the service change with before and after data or compare the change compared to published data from other centres. A service development that only describes the service with outcome data alone will not score highly. There must be valid data to show that the service development either worked or did not work.

Only a small number of **case reports** can be included in the poster display – therefore only cases of exceptional interest to an Acute Medicine audience will usually be accepted.

Any pictures of patients, including scans and pathological samples, should have the patient’s permission for presentation. Forms are on the website.

Clinical research abstracts should include an indication that ethics committee approval was provided, where appropriate.

**If Your Abstract is Selected**
All abstracts will be scored online. Authors will be notified after 29 July if their abstract has been shortlisted. You will be able to view your score and any feedback from the adjudicators by logging into the abstract system using your original login at: **www.acutemedicine.org.uk**

Individuals and organisations who are shortlisted will be invited to either give an oral presentation as part of the oral presentation session or to display an A0 (portrait) or A1 (landscape or portrait) size poster at the event.

**One author must register to attend the Meeting**

**Key Dates**
Submit your abstract online between **21 May – 19 July**

Feedback available from abstract adjudicators online from **29 July**

By Submitting an abstract you are giving the Society of Acute Medicine permission to publish on its website and in other ways considered appropriate.

Abstracts of oral presentations may be considered for publication in a future edition of the Acute Medical Journal. The definitive decision will be made following the presentation and is dependent on the overall quality. All materials will be credited to the author/s.

The decision of the adjudicators is final & no correspondence will be entered into.

**Please ensure you have obtained patient consent if appropriate. Patient consent forms can be found on the website.**
Guide to online submission

Abstracts should be submitted online at:

www.acutemedicine.org.uk

Follow the abstract submission links

Sign Up Page
Enter the submitter details. Create a new password that you will use to access the system.

Page 1 of 3
Insert your abstract title, type of presentation preferred: oral/poster and author details
Please note co-authors are not mandatory fields so please leave these blank if not applicable
Upload any supporting files e.g. tables/diagrams in any format.

Page 2 of 3
Enter your abstract text. There is a maximum limit of 300 words. Please ensure you use the headings below and follow this format:

Aim: Highlight why the project was undertaken and what the goals of the work included. This section should include a clear question or objective of the work undertaken.

Methods: What methods were used?

Outcomes/Results: What was achieved? How were the achievements measured or tracked?

Conclusion: What do the above results mean for the service and patients? Remember that the conclusion should reflect your stated aims and objective & results of study.
Case Reports

Case Reports do not need to follow the format for scientific abstracts. A good case report will provide a succinct summary of the case and a brief review of the topic. As long as this guidance is followed, authors are free to choose the formatting of a case report.

Please note that texts pasted in from other applications (e.g. Word) will lose most of their formatting. It is best practice to paste plain, unformatted text and use the editor on screen to format it.

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Preview your abstract and make any changes by clicking Back before you click submit.

SCORING

Abstracts will be scored by two referees with an overall arbitrator assigned to each of the categories, using the following scoring system.

1. **Scientific Rigour**: Is there a clear question/purpose to the abstract? Are the subjects clearly defined, e.g. patient types and are the methods & presentation thorough and systematic? Do the results and/or conclusion accurately reflect the evidence and draw appropriate conclusions?

2. Is there a clear **learning point** for Delegates? Is the abstract content especially relevant and interesting and may bring new thoughts and ideas to Acute Medicine?

3. Is the abstract **well written**?

4. For **Case Reports**: A **good** Case Report should contain a learning point that will either change or challenge clinical practice. Being rare isn’t a qualifying criterion in itself.