Annual Research Day 2017

March 23, 2017

Abstract Submission Guidelines

The Annual Research Day is a celebration of scholarly activities conducted at St. Elizabeth’s Medical Center (SEMC) and Carney Hospital (CH) by interns, residents, and fellows enrolled in ACGME-accredited training programs in collaboration with faculty members.

General Guidelines

- Use online abstract submission form provided at the following website: http://www.semcresearchday.com
- Work done at other institutions (with outside faculty supervision) is permitted only if the work was done since the trainee became affiliated SEMC or CH. The trainee must be the presenting author and must have participated directly in the research. Residents engaged in research years or extended research rotations are considered current trainees. Work done at outside facilities prior to the start of training at SEMC or CH will not be accepted.
- Abstracts should reflect work done by interns, residents or fellows enrolled in an ACGME-accredited training program at SEMC or CH and with active involvement of SEMC or CH faculty, done between 2016 and 2017.
- Limit abstract text to no more than 350 words.
- Abstracts and articles published prior to 2016 should not be submitted for presentation at the meeting.

Submission

- Abstracts must be received electronically via the online abstract submission portal found on the website listed above. Once submitted, the abstract cannot be retrieved for revision.
- Abstracts must be submitted by Friday (5:00 pm), February 10, 2017.
- First author shall receive notification by email on Friday March 10, 2017 whether abstract has been selected for an oral or poster presentation.
- Accepted abstracts must translate into a poster. All correspondence will be sent to the presenting author. Authors will receive a poster number to guide where to post the poster in the Seton Auditorium.
- Abstracts submitted must comply with the guidelines to be considered for acceptance.
- All submitted abstracts will be included in a brochure distributed at the Research Day event.
- Further inquiries about the abstract submission process can be directed to sem.researchday@steward.org
Abstract Submission Categories

a) **Original Investigation**
Examples of original investigations include studies with the following design: case series, clinical trial, diagnostic test study, observational study (case-control, retrospective or prospective cohort study), decision analysis or cost-effectiveness analysis, and systematic review or meta-analysis.

Original investigations must include a statement relating to **institutional review board approval** in the “Methods” section.

<table>
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<tr>
<th>Abstract Elements</th>
<th>Requirements</th>
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<tbody>
<tr>
<td>Length</td>
<td>350 words</td>
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<tr>
<td>Subheadings</td>
<td>Background; Study Design; Setting and Participants; Methods (Predictors, Intervention or Index Test and Outcomes); Results; Limitations; Conclusions</td>
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b) **Quality Improvement Report**
A quality improvement report is the description of an activity that leads to measurable improvement in health care services and the health status of targeted patient groups. A quality improvement activity focuses on systems and processes and does not follow the design of a prospective research study such as a clinical trial or an observational study. Further details on quality improvement initiatives can be found at [http://www.hrsa.gov/quality/toolbox/methodology/qualityimprovement/index.html](http://www.hrsa.gov/quality/toolbox/methodology/qualityimprovement/index.html).

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<td>Background; Setting and Participants; Quality Improvement Plan (Measurements and Outcomes); Results; Limitations; Conclusions</td>
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c) **Case Reports:**
- Clinical Vignettes represent case reports (up to 10 cases can be summarized).
- A case report shall present an unusual or unknown disorder, an unusual etiology for a case, or a challenging differential diagnosis; illustrate a clinical hypothesis, prompt, disconfirm or support a new hypothesis; offer new insight into the pathogenesis of disease; describe unusual or puzzling clinical features of case; describe improved or unique technical procedures; report unusual drug-drug, drug-food, or drug-nutrient interactions; or describe rare or novel adverse reactions to care.
- Abstract submissions in this category must be novel or unique, and provide learning value for clinicians.
- Abstract must be clearly organized into and Introduction, a Description of the Case(s), and a Discussion with a focus on the “learning value” of the case, which must be presented clearly and concisely.
### Abstract Elements

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### Author Responsibility

Authors accept the sole responsibility for the statements in their abstracts. The submitting author must certify that the abstract is being submitted with full knowledge and consent of all contributing authors; all information provided regarding funding, conflict of interest, and publication status is complete and accurate, and that the clinical study (where indicated) has been conducted according to an approved Institutional Review Board protocol.

### Selection Criteria

Abstract submitted under the Original Investigation and Quality Improvement Report categories will be reviewed for the following elements:

1. **Validity** (1, little bias, likely valid; 3, some bias, probably valid; 5, substantial bias, likely not valid):
   - N/A 1 2 3 4 5
2. **Originality** (1, very new; 3, somewhat new; 5, already well known):
   - N/A 1 2 3 4 5
3. **Clinical Importance** (1, great/immediate; 3, moderate/eventual; 5, little):
   - N/A 1 2 3 4 5
4. **Overall Rating** (1, best; 3, average; 5, poorest):
   - N/A 1 2 3 4 5
Abstracts submitted under the Clinical Vignette category will be reviewed and rated for their learning value using a 5-point Likert scale:

1) **Most** learning value
2) **Above average** learning value
3) **Average** learning value
4) **Limited** learning value
5) **Least** learning value

Accepted abstracts will be displayed in **Poster format** (see below for details).

Out of those accepted abstracts that are displayed in poster format, 5 finalists will be selected for Oral Presentations:

- 1st, 2nd and 3rd place - Original Investigation Category
- 1st place - Quality Improvement Report Category
- 1st place - Clinical Vignette Category

An outside Judging Panel will review the abstracts submitted under the Original Investigation and Quality Improvement Report categories, and select the 4 finalists for oral presentations.

The Research Day Planning Committee will select an internal judge panel to review the abstracts submitted under the Case Report category, and select the finalist for an oral presentation.

The rating of the abstracts shall be completed 4 weeks in advance.

Authors selected for oral presentations will receive an acceptance letter with instructions to guide their PowerPoint presentation. Acceptance notifications will be emailed on **Friday March 10, 2017**.

**Poster Set-Up**

**Poster Mounting:**
- Each poster board is numbered sequentially in the Seton Auditorium.
- Authors shall locate assigned poster board and mount poster 24 hours in advance in Seton Auditorium between 2:00 and 5:00 pm.
- Pushpins will be provided.

**Poster Take-Down:**
- Authors shall disassemble poster at the end of the session by March 23rd, 5 pm.
- Any materials left on the poster board at the end of the session will be removed and discarded.

**Poster Design**

**Poster Board Dimension:** Surface of the Board: 4 feet high and 6 feet wide (48”h x 72”w)

**Recommended Poster Sizes (unless specified otherwise and communicated to the author):**
- 36”h x 60”w

**Header:** Prepare a headline that identifies your research to be mounted at the top of the poster board. Lettering should be 1 ½”[3.81 cm] high or more. Include authors and their affiliations under the header.
**Organization:** The key is to achieve **clarity** and **simplicity.** Do not overload the poster. Use a coherent sequence (top to bottom or left to right) to guide the viewer through the poster. Use figures, tables, graphs and photographs when appropriate; keep text brief. It may be helpful to have materials pre-mounted on mounting boards. *All materials should be legible from a distance.*

**Typography:** Avoid using abbreviations, acronyms and jargon. Do not use industry logos or brand names. Font should be consistent throughout.