



Call for Abstracts

General

Important Dates

- Abstract Submission Opens: August 4, 2015
- Abstract Submission Deadline: December 31, 2015 (**deadline will not be extended**)
- Abstract Notifications Sent by: January 27, 2016
- Early-Bird Registration Cut-Off: February 8, 2016
- ePoster Submission Deadline: March 1, 2016 (**deadline will not be extended**)
- Pre-Registration Deadline for Presentation: March 10, 2016

Abstracts must be submitted via the online submission system at www.asra.com. The system allows storing abstracts as a draft in order to make changes. However, abstracts must be formally submitted before the deadline in order to be considered. Key abstract submission guidelines include:

- In proper and grammatically correct English
- No limit to the number of abstracts that may be submitted
- If previously submitted to a different meeting an abstract may still be submitted
- The submitting author is required to ensure that all co-authors are aware of the abstract content before submission
- ASRA does not share with an institution or employer information of those who have submitted abstract(s)
- A presenter is expected to attend the meeting and present the poster
- Meeting registration is required at least 3 weeks prior to the meeting in order to be included in the final program
- There is no fee to submit an abstract, but there is a \$65 fee to submit an ePoster after abstract acceptance
- Quality suitable for publication and strict adherence with all requirements outlined in the call for abstracts

Submission Content

Abstract Category

- Scientific Abstracts
 - Acute Pain
 - Chronic Pain
 - Regional Anesthesia
 - Emerging Technology
 - Education
 - Case Series (5 or more patients)
- Medically Challenging Cases
Report of up to 4 cases having a similar presentation; case series of 5 or more patients must be presented as a scientific abstract

Abstract Title (limited to 25 words in sentence format)

Submitting Author Details

The submitting author will receive all communications regarding the abstract and is responsible for informing the other authors, as necessary.

Co-Author(s) Details

Name, contact information, role (author, co-author, presenting author), and display/list order.

Abstract Body

Strictly limited to 500 words over the following content areas (not including References):

- Introduction
- Materials and Methods (NA for case reports)
- Results / Case Report



- Discussion
- References
- Tables
 - Maximum 3 tables of 10 rows x 10 columns
- Images
 - Patient faces must be entirely covered
 - Only figures in JPG format may be uploaded
 - Maximum 2 images
 - Maximum file size of each image is 500 KB
 - Maximum pixel size is 600(w) x 800(h) pixel

Important Considerations

- No promotional content of a commercial entity may be included (brand/trade/product names, photos, logos, company names, etc.).
- If necessary for clarity, a trade/product name may be included parenthetically once in the materials and methods section, but no more, and not in the abstract title. If more than one company makes the product, all applicable trade names are identified.
- Any off-label indications should be clearly marked as such.

Mandatory Attestations

Conflicts of Interest Disclosure

All submissions require disclosure of financial or other relationships with a commercial interest producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients. Disclosure must include the company name(s) and nature of relationship (honoraria/expenses, consulting/advisory board, funded research, royalties/patent, stock options, equity position/ownership, employee, other similar relations). Disclosure is required for the submitting author and their spouse/partner over the last 12 months.

Patient and/or Institutional Review Board (IRB) Approval

- I have obtained patient and/or institutional review board (IRB) approval and included this in my abstract.
- An institutional review board (IRB) and/or animal use committee has waived the requirement for their formal approval of the study.

Off-Label Drug Use

- If my study involves off-label use of drugs placed near the neuraxis, I have obtained an FDA IND and/or I have followed the conditions set forth regarding such experimentation as described within the [Information for Authors of ASRA's journal *Regional Anesthesia and Pain Medicine*](#).
- If my study involves off-label use of drugs for peripheral nerve block, I have obtained IRB approval.
- Any off-label indications have been clearly marked as such.

Trade Names

- No promotional content of a commercial entity is included (brand/trade/product names, photos, logos, company names, etc.).
- If necessary for clarity, a trade/product name is included parenthetically once in the materials and methods section, but no more, and not in the abstract title. If more than one company makes the product, all applicable trade names are identified.

Copyrighted Material

- There are no copyrighted figures, images, or content in my abstract.
- If copyrighted figures, images or content are contained in my abstract, I have obtained the necessary permission from the copyright owner.

Patient Health Information

- All patient protected health information has been de-identified; patient faces are entirely covered.

Oral Presentation

- I would like my abstract to be considered for oral presentation during the moderated poster sessions.
- I am a resident or fellow and would like to be considered for a travel award and oral presentation.



Agreement and Submission

- I reviewed this abstract and all information is correct. I accept that the content of this abstract cannot be modified or corrected after final submission; I am aware that it will be published exactly as submitted.
- I and all others listed as (co-)authors contributed substantively to the writing, review, and work described by this abstract, and further affirm that it was not prepared or written by anyone not listed as an author.
- I am the sole owner and/or have the rights of all the information and content. The publication of the abstract does not infringe any third party rights including, but not limited to, intellectual property rights. I herewith grant ASRA a royalty-free, perpetual, irrevocable nonexclusive license to use, reproduce, publish, translate, distribute, and display the abstract content.
- Submission of the abstract constitutes my consent to print and/or electronic publication (e.g. meeting website, program, other promotions, etc.)
- The submitting author is responsible for informing the other authors about the status of the abstract.
- I understand that my abstract may be immediately rejected and/or removed from any publication if it does not thoroughly comply with all of the above requirements.

Review and Grading Process

Abstracts are blind reviewed by at minimum 2 committee members and are graded using a 3 to 1 scale, with 3 being “must accept and consider for best of meeting”, 2 being “accept” and one 1 being “reject” (reason for rejection to be briefly stated). The ASRA committee performing the review and selecting abstracts for presentation is identified based on the abstract category.

- **Scientific Abstracts**
 - Research Committee
 - Support from the Scientific/Education Committee members with expertise in each field as necessary
- **Medically Challenging Cases**
 - Scientific/Education Planning Committee

The ASRA committee review and ranking of abstract submissions does not constitute peer review and should not be interpreted as such. Notification regarding the status (accepted for poster presentation or rejected) will be sent to the abstract author approximately 2 months prior to the meeting. Some submitted abstracts may not be accepted based on their quality or space limitations at the meeting venue.

Reviewer Checklist

Reviewers will complete the checklist below to verify that all requirements are integrated into the submitted abstract. Abstracts not complying with all requirements will be automatically rejected. There will be no revision and resubmission period or process.

Submission Requirements:

- The abstract is correctly categorized.
- The abstract is incorrectly categorized and should be re-categorized (see comments).
- All abstract content areas are thoroughly completed.
- Conflicts of interest disclosure and financial support have been declared.
- IRB, animal use committee, and/or patient consent stated or waived, as necessary.
- If off-label use, proper approval obtained (IND and/or IRB) and/or follows conditions set forth regarding such experimentation as described within the [Information for Authors of ASRA's journal *Regional Anesthesia and Pain Medicine*](#).
- Any off-label indications have been clearly marked as such.
- No promotional content has been used (brand/trade names, logos, ultrasound logos, etc.). If necessary for clarity, a trade/product name is included parenthetically once in the Materials and Methods section, but no more, and not in the abstract title. If more than one company makes the product, all applicable trade names are identified.
- Copyright permission obtained, if necessary.

Scoring:

- 3: Accept and consider for oral presentation and best of meeting
- 2: Accept
- 1: Reject
- Comments, reasons for rejection, or re-categorization: (open text box)



Presentation during Meeting

ePoster Fee

ASRA does not charge a fee to submit an abstract. However, \$65 will be charged for each abstract actually accepted for ePoster presentation. This payment is non-refundable and partially offsets ASRA's cost for abstract presentation in the ePoster format. This ePoster fee is generally less expensive than printing a poster; printed posters are not accepted (except for the best of meeting abstracts, see award section below). The ePoster fee will be charged after abstract acceptance and upon online submission of the ePoster.

Meeting Pre-Registration

Only abstracts/ePosters by attendees who register at least 3 weeks prior to the meeting will be included in the final program and meeting materials. Meeting registration is refundable according to the meeting cancellation policy.

Eligibility

Only authors listed on the submitted abstract may present onsite during the meeting. Investigators who have abstracts approved for presentation but fail to attend the meeting three years in a row will be prohibited from submitting abstracts for the following two years.

ePoster Display

All abstracts accepted for poster presentation during the annual meeting will be available onsite each day using ePoster technology. Multiple plasma screens will be available in a clearly identified viewing area. Posters will be grouped by category and subcategory. The ePosters will not be formally moderated during general viewing hours. Authors are encouraged to be available in the ePoster area during the break times for those attendees who may want to ask questions.

Moderated Poster Sessions

Upon submission, authors will have the option to indicate if they would like to be considered for oral presentation during the annual meeting. A selection of posters are chosen for oral presentation during the moderated poster sessions. The maximum number of moderated sessions will be determined by the scientific/education planning committee and project management team based on program organization and meeting space; ASRA will provide as many opportunities as possible. Moderated poster sessions will include one dedicated session for medically challenging cases. All other sessions will be allocated for presentation of scientific abstracts; these sessions will be structured according to category and subcategory as much as possible. The final number of presentations will be based on the quality of submitted abstracts. Posters will be moderated at various times by various moderators. 9 to 12 abstracts will be assigned per session. Each presenter will be allocated maximum 10 minutes per poster (5 minutes presentation and 5 minutes discussion).

Awards

Eligibility

Membership in ASRA is not required to submit an abstract. However, only abstracts submitted by ASRA members will be considered for the best of meeting awards.

Best of Meeting Abstracts (*Scientific Abstracts only*)

The top 10 highest scoring scientific abstracts that have met all ASRA abstract submission requirements and ASRA membership will be sent to the research committee, which will select 3 best of meeting abstracts. Best of abstract winners are included in the moderated poster sessions and are also invited to give an oral presentation from the podium as part of the excellence in ASRA awards luncheon. Presenters have a maximum of 3-5 minutes and 5-7 slides for their presentation. Slides have to be sent to the research committee chair at least 2 weeks prior to the meeting. A certificate is given to the winners (mailed by the ASRA office after the meeting), winning abstracts are tagged in the ePoster system, and printed posters are displayed in the meeting registration area (award recipients are responsible for providing a 36"x 48" printed poster; ASRA will reimburse up to \$100 for printing costs upon receipt submission). Best of meeting award recipients must be present to receive the award and participate in the above presentation activities. If a winner is unable to participate, an alternative award winner will be selected.



Resident/Fellow Best of Meeting Abstracts and Research Travel Award

Upon submission, resident/fellow submitters have the option of having their abstract considered for the resident/fellow research travel award. The top 10 highest scoring resident/fellow scientific abstracts will be sent to the research committee chair who will then select 3 to receive an award. The resident/fellow best of meeting and research travel award recipients will be invited to give an oral presentation from the podium as part of the resident and fellow education program. Winners will also receive complimentary meeting registration (main meeting and resident/fellow program only; additional activities not included) and a travel award covering economy airfare, and two days lodging and per diem (not to exceed \$1500). A certificate is given to the winners (mailed by the ASRA office after the meeting), winning abstracts are tagged in the ePoster system, and printed posters are displayed in the meeting registration area (award recipients are responsible for providing a 36"x 48" printed poster; ASRA will reimburse up to \$100 for printing costs upon receipt submission). Resident/fellow best of meeting and research travel award recipients must be present to receive the award and participate in the above presentation activities. If a winner is unable to participate, an alternative award winner will be selected.

Availability after Meeting

ASRA Society and/or Meeting Websites

Abstracts (as submitted for initial grading) will be included on the ASRA website with no pre-determined removal date. All submitted ePosters will be available online prior to the meeting. Medically challenging cases ePosters will remain online for up to three months after the meeting and scientific abstracts for up to three years.

Regional Anesthesia and Pain Medicine Journal (RAPM) Listing (Scientific Abstracts only)

Regional Anesthesia and Pain Medicine (RAPM) is ASRA's official journal, publishing peer-reviewed scientific and clinical studies. Scientific abstracts presented during the annual meeting are listed in the journal with abstract title, author, and affiliation data only; full abstracts are not included in print, but will be posted on the ASRA website with a link to the RAPM journal website. Medically challenging cases will not be printed in the journal or available on the journal's website. ePosters will not be printed in the journal.