Abstract Submission Instructions and Guidelines
FETP International Night 2018
Atlanta, GA, USA
April 16-19-2017

PROCEDURES AND DEADLINE:

- **Deadline for final abstracts:** The deadline for abstracts to be received via TEPHINET's web-based abstract submission platform is *Sunday, November 26, 2017 by 11:59 pm USA Eastern Standard Time.* **There will be no extensions to this deadline.**

- **Submission of abstracts:** Current trainees/fellows submitting abstracts should receive approval for submission from their Program Directors and/or Resident Advisors. Program directors/resident advisors should encourage and assist their fellows/graduates to submit abstracts to the program.

- **Program rankings:** Because of limited space for presentations during International Night and a desire to maintain a broad representation of programs, **a maximum of 10 abstracts can be submitted from any single program and 1 abstract per person (first authors).**

  In the case of a program submitting multiple abstracts for consideration, program directors/resident advisors should rank them and provide this ranking to the FETP International Night organizers. The results of the independent peer-review will take precedence in determining abstract acceptance; however, if there are ties or minimal differences in final scores within a given program's submissions, the director's/resident advisor's input will be considered in determining the final selection. Priority for financial support will be given to the abstracts accepted for oral presentation.

- **Web-based abstract collection**. Abstracts will be collected on our web-based system, https://fetpintlnight.exordo.com/

- **Web-based abstract collection:** Abstracts will be collected on TEPHINET's web-based system, which will open for submissions on October 23, 2017 and close to submissions on November 26, 2017. To submit an abstract, you must create an account. At the top left of the page in the 'Your To Dos' section, click on 'submit a paper.' Any information entered will be saved and can be returned to and edited at your convenience. *No changes can be made after November 26, 2017.*

INSTRUCTIONS FOR ABSTRACT SUBMISSIONS:

- Use Microsoft Word to create your abstract. Save each abstract and other documents as separate files and paste them into the web-based abstract submission system.

- Abstracts may not exceed 300 words in length. A word count is easily obtained by selecting the appropriate text of the abstract and then choosing the "Word Count" command in the "Tools" menu of MS Word. On the application site, the abstract is divided into four sections: Background, Methods, Results, and Conclusions. The total word count of all four sections cannot exceed 300 words.

- You may save information and edit your submission up to the submission deadline. Changes cannot be made to the abstract after November 26, 2017. For duplicate submissions, only the latest submission will be reviewed. No abstracts will be accepted past the official due date and abstracts previously accepted for presentation(s) will not be accepted for presentation at a subsequent TEPHINET conference.

- Because of production limitations, no graphics can be accepted.

ABSTRACT FORMAT:

TEPHINET collects the following information for each abstract submitted online. (See sample abstract to determine how the abstract text should be pasted from MS Word into the web-based system):

1. **Title**

- Be brief. Avoid subtitles if possible.

- Capitalize major words only. Capitalize the second component of hyphenated terms.

- Do NOT use abbreviations or acronyms in title.

- Give geographic location (country, state or city) and dates of study or investigation. Do not abbreviate geographic locations; separate them from the rest of the title by a dash, e.g., "Outbreak of Pneumonia - Texas, 1995."

2. **Abstract text**

- Structure the abstract, using the following subheadings to identify each section: **Background**, **Methods**, **Results**, **and Conclusions**.

- The **Background** section should address both (1) the public health significance of the subject and (2) the scientific background and rationale for the study.

- Since an abstract is a citable document, the **Results** section must contain data. It should not include such statements as "Data will be discussed." *If considerable work is needed before the conference, please state in the abstract that results are preliminary*.

- Changes cannot be made to the abstract after the submission deadline of November 26, 2017. If the results and conclusions of the study do change based on data analysis done after submission of the abstract, you may highlight the changes in your presentation, whether oral or poster, if your abstract is accepted.

3.   **Authors and FETP identification**

- Please submit the names and email addresses of all authors that should be listed on the paper. **Please ensure that all of your co-authors have agreed to being listed on the paper prior to submitting your abstract.**

- Only the applicant should be designated as the presenting author. All additional authors should be listed as corresponding authors.

- Submit the name of the country where the FETP is based in the author field. All authors listed on a single abstract should have the same country, unless the abstract represents work done in collaboration between multiple FETPs.

- If you are submitting a paper on someone else's behalf, when your name appears in the author field please click 'Edit' and then select 'I am not an Author.'

4.   **Topics:**

- First select research area by clicking on either 'Infectious' or 'Non-Infectious'. Then select one relevant research subject from the list provided.

5.   **Research Methods:**

- Indicate research method and abstract type by selecting from the drown-down menus. If you choose 'other' then specify in the space provided.

6.   **Key words:**

- Please include 4 to 6 key words separated by a comma. Use terms listed in the Medical Subject Headings (MeSH) from the Index Medicus: https://meshb.nlm.nih.gov/#/fieldSearch

7.   **Presenter and Program Director/Resident Advisor Information:**

- Specify presenter details and contact information for Program Director/Resident Advisor.

STYLE GUIDELINES:

- Avoid using jargon, such as "cases" for "patients."

- Define all abbreviations upon first use in the abstract, e.g., oral contraceptives (OC), except for those used in standard measurements, e.g., 25 mg\L.

- Use an en dash "-" with no spaces between characters for a dash. For example, "providers in the area–i.e., physicians."

- It is usual practice to spell out numbers less than 10 except in the case of standard measurements such as time, dose, and temperature, e.g., "two patients," but "2 cc" and "9 p.m."

- Use metric units. Show conventional terms, if desired, in parentheses, e.g., "0 C (32 F)."

- Use standard "mL," "cm," etc. Exception: Use "L" for liter.

- Use "%" with specific measurements, e.g., "2%," but use "percentage" in stating a generality or category, e.g., "The percentages reflect . . ."

- When a percentage is given in addition to a numerator and denominator, the percentage should directly follow the numerator and be enclosed in parentheses, e.g., "18 (86%) of 21 patients developed..."