PROCEDURES AND DEADLINE:

- **Deadline for final abstracts:** The deadline for abstracts to be received via TEPHINET’s web-based abstract submission platform is **December 2, 2022 by 11:59 p.m. Eastern Standard Time.** There will be NO extensions to this deadline.

- **Submission of abstracts:** Individuals must coordinate submissions with their program directors. **All abstracts must be submitted by a program director or their delegate.** Each program is allowed to submit up to four (4) abstracts. The site will be open to receive submissions in October 2022. Once the site is active, a link will be shared with program directors and they will be prompted to create an account and log in. **This method is the only submission method acceptable for an abstract to be considered.** For questions about using the platform, please contact Valerie Young at abstracts@taskforce.org. **{NOTE: Any abstract submitted outside of a program director or their delegate will NOT be considered for the conference.}**

- **Program Rankings:** Because of limited space for presentations and a desire to maintain a broad representation of programs, **a maximum of four (4) abstracts can be submitted from any single program and one (1) abstract per person (first authors).** All abstracts must be ranked in order of preference from 1-4, with “1” signifying the most preferred abstract and “4” signifying the least preferred abstract. Abstracts submitted without a ranking will NOT be considered. Although the results of the independent peer-review will take precedence, the scientific committee is ultimately responsible for considering all factors, including ranking, to determine abstract acceptance.

- **Web-based abstract collection.** Abstracts will be collected on our web-based system, which will open for submissions in October 2022 and close to submissions on December 2, 2022. To submit an abstract, program directors or their delegate must create an account. Any information entered will be saved and can be returned to and edited at one’s convenience. **No changes can be made after December 2, 2022.**
INSTRUCTIONS FOR ABSTRACT SUBMISSIONS:

- Program directors and/or their delegate should collect abstracts from interested candidates as Microsoft Word documents. Program directors and/or their delegates should simply copy and paste what is provided to them on the web-based submission system.

- Program directors and/or their delegate should ensure that each author listed on the abstract provides his/her email address. Otherwise, an author will NOT be recognized or credited for the abstract.

- 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 December 2, 2022. 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, 2019.”
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 December 2, 2022. 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**

- To submit 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.’

- Please submit the names and email addresses of all authors that should be listed on the paper. You will NOT be able to enter an author without his/her email and an author will NOT be credited for the abstract. **Please ensure that all of co-authors have agreed to being listed on the paper prior to submitting the abstract.**

- The main author (usually the first one listed on the abstract) is the corresponding author. Whoever is anticipated to present the abstract is the presenting author. If the main author anticipates to present the abstract if it is accepted, then he/she is both the corresponding and the presenting author. All other authors should be listed as co-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.

4. **Topics:**

- First select the research area by clicking on ‘Infectious’, ‘Non-Infectious’, or ‘Other’. Then select one relevant research subject from the list provided.
5. **Research Methods:**

- Indicate research method and abstract type by selecting from the drop-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](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 a 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..."