# **ACP Resources to Help Members Draft Abstracts**

ACP has developed resources on the entire scientific communication process, from writing the abstract to delivering the poster or oral presentation. See ACPOnline Web site at <a href="https://www.acponline.org/membership/residents/competitions-awards/abstracts/preparing">https://www.acponline.org/membership/residents/competitions-awards/abstracts/preparing</a>.

Submissions will be accepted online from August 1, 2019 – September 30, 2019 at the <u>Navy</u> Chapter ACP Webpage.

# **Types of Abstracts**

### **Clinical Vignette Competition**

A clinical vignette is a report of one or more cases that illustrates a new disease entity, or a prominent or unusual clinical feature of an established disease. It may include a summary of pertinent patient history, physical findings, laboratory data, or management description.

## **Research Competition**

Submissions can report clinical and/or laboratory-based research, delineate a new investigation into mechanisms of disease, or consist of a detailed review of a clinical problem. Abstracts concerned with efficiency, cost or method of health care delivery, quality of care, and medical decision-making are also encouraged.

#### **Quality Improvement - Patient Safety**

The following are guidelines for criteria for quality improvement abstracts:

- Brief description of context: relevant details of staff and function of department, team, unit, patient group
- Outline of problem: what were you trying to accomplish?
- Key measures for improvement: what would constitute improvement in the view of patients/clients?
- Process of gathering information: methods used to assess problems
- Analysis and interpretation: how did this information help your understanding of the problem?
- Strategy for change: what actual changes were made, how were they implemented and who was involved in the change process?
- Effects of change: did this lead to improvement for patients/clients how did you know?
- Next steps: what have you learned/achieved and how will you take this forward?

# **Publishing Abstracts/Submitting to Other Competitions or Journals**

Abstracts submitted to the ACP national abstract competition have the following provisions in place:

- Original abstracts that either have or have not been presented at other meetings including ACP Chapters/Regions will be considered.
- Abstracts previously submitted to the ACP National Meeting are not eligible and are subject to disqualification.
- Presentation of original work at the ACP meeting may, however, jeopardize presentation before another society.
- Abstracts may be eligible if they have been published; however, abstracts based upon full papers that have been published are not eligible.

# **Sample Abstract Guidelines and Information**

## **Clinical Vignette Competition**

**Definition:** A clinical vignette is a report of one or more cases that illustrates a new disease entity, or a prominent or unusual clinical feature of an established disease. It may include a summary of pertinent patient history, physical findings, laboratory data, or management description.

#### **Research Competition**

**Definition:** Submissions can report clinical and/or laboratory-based research, delineate a new investigation into mechanisms of disease, or consist of detailed review of a clinical problem. Abstracts concerned with efficiency, cost or method of health care delivery, quality of care, and medical decision-making are also encouraged.

**Author Eligibility:** The first author of an abstract must be an ACP Resident/Fellow Member or Medical Student Member in good standing.

You are encouraged to write your abstract in a format similar to that used in scientific papers so that it may be cited in curriculum vitae or submitted as evidence of scholarly activity when you are preparing to advance to Fellowship in the American College of Physicians.

#### Format:

- 1. Abstracts must be submitted on the official abstract form online, single spaced within the border using a 10 point font.
- 2. 450 word maximum for abstract
- 3. Title, typed in all caps, should be brief and clearly state content of paper.
- 4. Presenting author must list name first.
- 5. List name and one degree only, e.g., MD, DO for each author. Indicate their status within ACP. (Resident/Fellow Member, Member, or Fellow), if applicable. Professional title of positions should not be included.
- 6. List names of authors' institution(s), city, and state.
- 7. See ACP Online for more guidance

**Note:** The format used in the *Annals of Internal Medicine* is also encouraged.

## The body of the research abstract should be organized as follows:

- 1. Purpose for study (one sentence if possible).
- 2. Simple statement of methods.
- 3. Summary of results (adequate to support conclusions).
- 4. Statement of conclusions (Do not use phrases such as "The results will be discussed.")

## The body of the clinical vignette abstract should be organized as follows:

- 1. Introduction.
- 2. Case description
- 3. Discussion

**Style:** Write for clarity and directness. Avoid the use of medical jargon or stock empty phrases. A table may be used if its fits within the border lines. Keep in mind that grammar will be taken into consideration. Please proofread your abstract carefully.

#### **Abbreviations, Symbols, and Nomenclature**:

Usage should conform as closely as possible to that recommended in CBE Style Manual, (6<sup>th</sup> edition., 1994), published by the Council of Biology Editors, and available from CBE Secretariat, 9650 Rockville Pike, Bethesda, MD 20814. Nonstandard abbreviations must be kept to a minimum and must be explained when used. Generic names of drugs are preferred: a proprietary name may be given only with the first use of the generic name.

Units of measurement should be metric (SI), including those for height of length, mass (weight), and body temperature. Preferred concentration units in clinical chemical measurements are those recommended by the International Union of Pure and Applied Chemistry: for substances of

known, pure composition, millimoles/milliliter or millimoles/liter; for mixtures of substances where exact composition is not known, grams/liter.