

## ABSTRACT SUBMISSION GUIDELINES FOR CLINICAL POSTERS

### HOW TO USE THIS DOCUMENT

The first 3 pages of this document highlight key elements of abstract submission for clinical poster consideration and will get you started. The remaining pages contain detailed and important information you also need to know about abstracts, including full descriptions of each category and helpful tips for a successful submission. Please do not hesitate to contact us with questions.

### KEY DATES – **ABSTRACT DEADLINE EXTENDED!**

**May 8**                      Pre-submission review deadline

**August 1**                **Abstract Submission Deadline (open until 11:59 PM ET)**

### ABSTRACT SUBMITTER REQUIREMENTS

The abstract submitter must meet the following requirements:

- Be an oncology/hematology advanced practitioner (AP): NP, PA, PharmD, CNS, or master's degree or higher advanced practice nurse;
- Be a professional member of APSHO in good standing;
- Complete all requirements of abstract submission; and,
- **Attend the conference, including the moderated poster sessions, to present the poster should the abstract be accepted.**

### ABSTRACT SUBMISSION CATEGORIES AND SUBCATEGORIES

Advanced Practice Initiatives	Clinical Research & Quality Improvement
AP-Led Practice Initiatives	Clinical Research & Evidence-Based Practice
Educational Initiatives	Quality Improvement Projects/Quality of Care
Leadership/Professional Growth	

**NOTE:** A limited number of high-quality case studies will be considered for acceptance. Priority will be given to case studies focused on **Precision Medicine, Quality of Life, and Financial Toxicity.**

#### *Oral Poster Presentations*

Five clinical posters will be selected for oral poster presentation during a dedicated session at JADPRO Live, in addition to the two traditional moderated poster sessions.

#### **Abstract Pre-Submission Review Opportunity** (time sensitive – deadline May 8)

An APSHO advanced practitioner mentor will complete a high-level review, providing feedback and tips for abstract success. Direct questions to: [kelly.moore@broadcastmed.com](mailto:kelly.moore@broadcastmed.com).

#### **Information and Tasks Required for Abstract Submission**

All author tasks must be completed before the submitting author can submit electronically. Submitting authors should allow time for co-authors to complete their profile information and disclosure tasks electronically.

**Changes to the author listing and submission will not be permitted after the submission deadline.**

## Additional Instructions and Information Regarding Abstract Submission

- Abstract content must be objective and free from bias
- Content must be original, novel, relevant to APs, not previously presented or published, and not submitted for consideration elsewhere
- Submitters will be asked to attest to authorship and disclosure of use of artificial intelligence (AI)

### Abstract Title

The title at the time of submission will be the final title used in all references to the abstract. **Acronyms and brand names of drugs are not permitted in the title. Names of institutions in abstract titles are strongly discouraged.** The title is not included in the word count.

### Abstract Body and Word Count

Abstracts should be no more than 500 words, including section headings.

### Section Headings

**The abstract must be organized with section headings** such as Background, Methods, Results, Conclusions, Recommendations.

### Tables

Tables are not allowed within the body of an abstract but may be used on posters to describe your content.

### Mention of Therapeutics

Generic names may be used for drug mentions in abstracts and abstract titles. A brand name may be added in parentheses after the generic name, at first use only, in the body of the abstract but not in the abstract title.

### References and Permissions

References and/or permissions should be uploaded as separate documents and therefore will not be included in the word count. Please be prepared to upload as a PDF.

### Artificial Intelligence

Disclosure of the utilization of artificial intelligence (AI) tools is required if it is utilized for anything other than assistance with grammar, spelling, formatting, and reference clean up. Please see the full statement regarding disclosure and description of the use of AI for abstract or poster development in the full guidelines beginning on page 4.

### Projects in Progress and Late-Breaking Data

Abstracts eligible for review should describe completed work. Projects in progress may be considered for review if initial outcomes provide compelling information impacting advanced practice in oncology or hematology.

### Abstract Authors

A maximum of 10 authors is allowed. **Abstracts may not be written or submitted by parties on behalf of authors; submissions of this type will be declined.**

### APSHO Membership

An advanced practitioner who submits an abstract must be a current member of APSHO in good standing and have a completed member profile. For more information regarding your current membership status or to join APSHO, please visit [www.aphso.org](http://www.aphso.org).

### Important Tips for Successful Abstract Submission and Review

- Submit early and allow time for co-authors to complete their digital tasks.
- Refrain from mentioning institutions and other identifying information in the body of the abstract. Use descriptive phrases for your institution instead, for the purposes of blind review.
- Learn more about how abstracts will be reviewed. Read and note the criteria in the review process below.
- Recruit a seasoned colleague to read and critique your abstract before submission.
- Ask questions! Contact the abstract coordinator listed below.
- Be sure to hit the final submit button once all abstract information is entered and tasks are completed.
- Understand what is required once an abstract is accepted. Read the information on the posters below.

### Review Process

All completed abstract submissions that meet requirements will undergo review, including review by two or more peer reviewers utilizing a double-blind review process, via the electronic submission system. (Authors and peer reviewers will remain unknown to each other.) The submitting author may contact the abstract coordinator for questions throughout the process. The abstract coordinator may contact submitting authors with questions regarding abstract submissions.

### Abstract Peer Review

All completed submissions that meet requirements will undergo peer review. Abstracts are scored with a focus on key criteria: *Background, Methods, Results, Conclusions/Recommendations, Quality of Writing, Relevance, and Innovation*.

### Accepted Abstracts

Accepted abstracts will be eligible for poster presentation during JADPRO Live. Accepted abstracts will be published in an issue of the *Journal of the Advanced Practitioner in Oncology* (JADPRO) following the conference.

### Poster Presentations

Submitting authors whose abstracts are accepted for poster presentation will be contacted by the abstract coordinator with additional details and next steps in the process. **The poster presenter must attend the moderated poster sessions for in-person discussion of the poster with conference attendees.**

### Outstanding Poster Award

The annual APSHO *Outstanding Poster Award* will be presented during JADPRO Live. The review task force will use the same abstract peer review criteria (see review categories above) to consider all clinical posters submitted by the poster upload deadline. **To be eligible for the award, the final one-page image of the poster for the accepted abstract must be uploaded to the electronic submission system by 5 pm ET on October 23, 2024.**

### Accessing the Abstract Submission System

Submitting authors may access the abstract submission system by clicking on the abstracts tab of the [JADPRO Live website](#). After reading the guidelines, the submitting author should click on “Create Account” under the New Users area to create an account for the submission system. Once the account is created, the submitting author will be able

to access the abstract until the submission deadline. Submissions that are incomplete after the deadline will no longer be accessible.

**Full submission guidelines are also available for download within the submission system.** For questions or concerns regarding abstracts and posters for JADPRO Live, please contact the abstract coordinator, Kelley Moore, [kelley.moore@broadcastmed.com](mailto:kelley.moore@broadcastmed.com).

## DETAILED ABSTRACT SUBMISSION GUIDELINES FOR CLINICAL POSTERS

Thank you for your interest in submitting an abstract for consideration of clinical poster presentation at JADPRO Live, a CE-accredited conference for advanced practitioners (APs) in oncology and hematology, to be held November 14-17, 2024, at the Gaylord Texan in Grapevine, Texas. The conference chair invites oncology advanced practitioner professional members of the *Advanced Practitioner Society for Hematology and Oncology* (APSHO) to submit abstracts for clinical poster presentation. Conference attendees include nurse practitioners, physician assistants, clinical nurse specialists, pharmacists, advanced degree nurses, hematology/oncology nurses, and physicians.

**Final abstract submission deadline: Thursday, August 1, 2024, 11:59 PM ET**

Abstract submitters must complete all submission requirements by the final deadline of 11:59 pm ET on Thursday, August 1, 2024, for the abstract to enter the review process and be considered for clinical poster presentation. Deadline extensions and late-breaking data deadlines are not planned. Encore abstracts and posters are not accepted for review in this category.

### DID YOU KNOW?

The APSHO Education Committee now offers an opportunity for pre-submission review  
If you are looking for some extra support or guidance!

## ABSTRACT SUBMITTER REQUIREMENTS

The abstract submitter\* must meet the following requirements:

- Be an oncology/hematology advanced practitioner (AP): NP, PA, PharmD, CNS, or master's degree or higher advanced practice nurse,
- Be a professional member of APSHO in good standing,
- Complete all requirements of abstract submission; and,
- **Attend the conference, including the moderated poster sessions, to present the poster should the abstract be accepted.**

\* It is expected that the lead author submits the abstract and presents the poster (should the abstract be accepted). If a co-author on the abstract will be attending the conference and presenting the poster, that co-author should be the author who submits the abstract. If extenuating circumstances occur before the conference, and it is necessary for an author different than the submitting author to present, the author must have been a co-author on the original abstract at the time of submission, and the abstract coordinator should be notified as soon as possible.

## ABSTRACT SUBMISSION CATEGORIES AND SUBCATEGORIES

Advanced Practice Initiatives	Clinical Research & Quality Improvement
AP-Led Practice Initiatives	Clinical Research & Evidence-Based Practice
Educational Initiatives	Quality Improvement Projects/Quality of Care
Leadership/Professional Growth	

**NOTE:** A limited number of high-quality case studies will be considered for acceptance. Priority will be given to case studies focused on:

**Precision Medicine** – Case studies exploring the application of genetics and molecular components in diagnosis and treatment of pre-malignant or cancerous conditions.

**Quality of Life** – Case studies examining patient management in oncology focusing on impact on quality of life such as emotional well-being or ability to perform activities of daily life (ADLs). May include qualitative data.

**Financial Toxicity** – Case studies illustrating undue financial burden and financial distress faced by the patient in oncology.

### ***Oral Poster Presentations***

Five clinical posters will be selected for oral poster presentation during a dedicated session at JADPRO Live, in addition to the two traditional moderated poster sessions.

### ***DON'T MISS OUT! Abstract Pre-Submission Review Opportunity***

Abstract submitters may request a pre-submission review of their abstract by an APSHO advanced practitioner mentor. Abstracts should be a complete draft for this review and fully structured in the required format (see guidelines below). An APSHO advanced practitioner mentor will complete a high-level review, providing feedback and tips for abstract success. Feedback is provided for your consideration and is not required for your abstract to be considered for acceptance. Additionally, participation in this activity does not guarantee abstract acceptance during final review. We encourage submitters of any experience level to take advantage of this opportunity. **To participate, review the guidelines, prepare your abstract, and email it to the abstract coordinator: [kelly.moore@broadcastmed.com](mailto:kelly.moore@broadcastmed.com) by the pre-submission deadline of Wednesday, May 8, 2024, indicating you would like pre-submission feedback.** Authors will receive feedback around the first week of June. Those who participate in this opportunity will still need to officially complete and submit their abstract in this submission portal by the submission deadline of Thursday, August 1, 2024.

### ***Information and Tasks Required for Abstract Submission***

An abstract submission must include the following information and be electronically submitted by the deadline. Submitters may save their work and come back to complete it.

Submitting Author:

- ☐ Full name, credentials, title/position, institution, email, phone number, and APSHO membership confirmation
- ☐ Curriculum vitae (CV) or resume
- ☐ Disclosure form (each author on the abstract is required to complete one electronically)
- ☐ Final abstract title
- ☐ Complete body of abstract including appropriate subheadings
- ☐ Declaration of the role of the authors in the work/content presented in the abstract
- ☐ Disclosure of the use of artificial intelligence (AI) and agreement to responsibility for accuracy
- ☐ Confirmation of original authorship (completed by submitting author)
- ☐ Completed Copyright Transfer Agreement for Abstracts (lead or representative author approved by

the lead author must complete)

- ☐ Permissions, if applicable (may be uploaded as supporting documentation)
- ☐ References (encouraged but not required; may be uploaded as supporting documentation)

**Co-Authors:**

- ☐ Full name, credentials, title/position, institution, email, and phone number
- ☐ Self-completed disclosure form (each author listed on the abstract must complete one)

All author tasks must be completed before the submitting author can submit electronically. Submitting authors should allow time for co-authors to complete their profile information and disclosure tasks electronically.

**Changes to the author listing and submission will not be permitted after the submission deadline.**

**Abstract Content**

Authors are advised to make certain the abstract addresses the significance of the topic for oncology advanced practice and provides a clear description of the role of, and implications for, advanced practitioners in oncology/hematology. In addition:

- Abstract content must be objective and free from bias.
- Content must be original, novel, significant to advanced practitioners, not previously presented or published, and not submitted for consideration elsewhere.
- Content should describe a completed initiative (see below for more information regarding complete or incomplete initiatives).
- Encore abstracts and abstracts discussing trials in progress will not be considered for review in this category.

**Abstract Topic**

Submitters will be required to identify a category and subcategory for their abstract.

The following tables outline guiding principles, examples, and additional considerations for each.

<b>Category: Advanced Practice Initiatives</b>		
<b>Sub-category: AP-Led Practice Initiatives</b>		
<b>Guiding Principles</b>	<b>Examples</b>	<b>Additional Considerations</b>
<ul style="list-style-type: none"><li>• Developed and implemented by APs in the field of hematology/oncology</li><li>• Projects intended to showcase the unique contributions and innovations made by APs in improving patient care and outcomes in hematology and oncology</li></ul>	<p>Projects may involve the development and implementation of:</p> <ul style="list-style-type: none"><li>• New/improved interventions</li><li>• New/improved treatment protocols</li><li>• New/improved care delivery models that aim to improve patient outcomes and QoL for patients with cancer</li></ul> <p>Examples may include projects that focus on:</p> <ul style="list-style-type: none"><li>• Optimizing symptom management</li><li>• Enhancing patient education and support</li><li>• Improving care coordination</li><li>• Implementing innovative care delivery models</li></ul>	<ul style="list-style-type: none"><li>• Provide a detailed description of the project's methodology &amp; interventions, including:<ul style="list-style-type: none"><li>○ Project design &amp; patient population</li><li>○ Data collection methods</li><li>○ Evidence based interventions or protocols used</li></ul></li><li>• Include an evaluation of the project's outcomes and impact, such as data on improvements in patient outcomes, patient satisfaction scores, healthcare provider adherence to best practices, etc.</li><li>• Highlight the advance practice skills and expertise utilized in the project and how the project contributes to advancing the role of APPs and improving patient care in hematology/oncology.</li></ul>

		<ul style="list-style-type: none"> <li>• Include discussion of lessons learned, recommendations for future projects, and/or strategies for implementing and spreading successful interventions.</li> </ul>
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<b>Category: Advanced Practice Initiatives</b> <b>Sub-category: Educational Initiatives</b>		
Guiding Principles	Examples	Additional Considerations
<ul style="list-style-type: none"> <li>• Projects that focus on education interventions or initiatives aimed at improving knowledge, skills, and competencies related to oncology care. Targets may include healthcare professionals (especially APs), patients, or caregivers</li> <li>• Highlight innovative approaches and/or technologies utilized to enhance the experience of participants</li> </ul>	<p>Projects may include implementation of:</p> <ul style="list-style-type: none"> <li>• Workshops</li> <li>• Seminars</li> <li>• Online modules</li> <li>• Educational materials</li> </ul>	<ul style="list-style-type: none"> <li>• Clearly outline educational goals and objectives, including target audience and the intended specific knowledge or skills that the initiative aims to enhance</li> <li>• Include a detailed description of the educational method/strategy</li> <li>• Include clear evaluation of the educational effectiveness: <ul style="list-style-type: none"> <li>○ Data on participant satisfaction</li> <li>○ Post-intervention knowledge or skills assessment</li> <li>○ Other relevant outcome measures</li> </ul> </li> <li>• Highlight innovative approaches and/or technologies used to enhance the experience of participants</li> <li>• Discuss implications of the educational initiative for oncology care, such as: <ul style="list-style-type: none"> <li>○ How the initiative has improved APs ability to provide optimal care</li> <li>○ How the initiative increased patient's understanding of their condition and treatment options</li> </ul> </li> <li>• How the initiative enhanced overall quality of care delivery</li> </ul>

<b>Category: Advanced Practice Initiatives</b> <b>Sub-category: Leadership, Professional Growth, and Development</b>		
Guiding Principles	Examples	Additional Considerations
<ul style="list-style-type: none"> <li>• Submissions should highlight the key role APs play in driving positive change and improving outcomes in the field of hematology/oncology</li> <li>• Projects or initiatives should focus on enhancing the knowledge, skills, and competencies of APPs in the field of hematology/oncology and highlight the importance of continuous learning and professional growth for</li> </ul>	<p>Specific areas of professional development targeted may include:</p> <ul style="list-style-type: none"> <li>• Leadership</li> <li>• Clinical skills</li> <li>• Research methodology</li> <li>• Communication skills</li> </ul> <p>Methods and strategies used in the initiative may include:</p>	<ul style="list-style-type: none"> <li>• Clearly outline the project or initiative being presented: <ul style="list-style-type: none"> <li>○ Leadership challenge or opportunity the project addresses</li> <li>○ Goals and objectives of the initiative</li> </ul> </li> <li>• Describe how leadership initiatives were utilized to inspire and motivate teams, drive innovation, and/or</li> </ul>

delivering high quality care to individuals with cancer	<ul style="list-style-type: none"> <li>• Workshops</li> <li>• Conferences</li> <li>• Webinars</li> <li>• Mentorship programs</li> <li>• Other educational activities geared toward growth &amp; development</li> </ul>	<p>improve communication and collaboration</p> <ul style="list-style-type: none"> <li>• Include an evaluation of the initiative's impact, such as: <ul style="list-style-type: none"> <li>○ Data on participant satisfaction</li> <li>○ Self-assessment of knowledge or skills improvement</li> <li>○ Data on improvements in team performance, patient outcomes, or organizational metrics directly related to the project</li> <li>○ Other relative outcome measures</li> </ul> </li> <li>• Discuss implications of the initiative for oncology practice, such as: <ul style="list-style-type: none"> <li>○ Lessons learned</li> <li>○ Recommendations for future leaders</li> <li>○ Insights into how effective AP leadership can contribute to positive change and improved outcomes in oncology care</li> </ul> </li> <li>• Ways the initiative has improved APs ability to provide optimal care, enhanced patient outcomes, contributed to research advancements, and/or ability to effectively lead multidisciplinary teams</li> </ul>
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<b>Category: Clinical Research and Quality Improvement</b> <b>Sub-category: Clinical Research and Evidence-Based Practice</b>		
Guiding Principles	Examples	Additional Considerations
<ul style="list-style-type: none"> <li>• Projects based on clinical evidence or best practice guidelines in the field of hematology/oncology</li> <li>• Projects that aim to improve quality of patient care by using evidence-based interventions &amp; treatment protocols that have been shown to be effective in clinical practice</li> </ul>	<p>Projects may include:</p> <ul style="list-style-type: none"> <li>• Prospective research studies</li> <li>• Retrospective chart reviews</li> <li>• Case series</li> </ul>	<ul style="list-style-type: none"> <li>• Ensure to clearly state: <ul style="list-style-type: none"> <li>○ The research question or clinical problem the project seeks to address</li> <li>○ Methodology used to conduct the project</li> </ul> </li> <li>• Include discussion surrounding clinical implications of the project findings and how this can be applied in clinical practice by APs</li> <li>• Critical appraisal of the evidenced used to inform the project's interventions or treatment protocols, such as: <ul style="list-style-type: none"> <li>○ Description of the quality of evidence used</li> <li>○ Any limitations or biases that may have affected the research</li> <li>○ How the evidence was synthesized to inform the project's clinical recommendations</li> <li>○ Summary of the projects impact on patient outcomes and quality of life</li> </ul> </li> </ul>



		<ul style="list-style-type: none"> <li>○ Recommendations for future research or clinical practice changes</li> </ul>
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<b>Category: Clinical Research and Quality Improvement</b> <b>Sub-category: Quality Improvement Projects/Quality of Care</b>		
<b>Guiding Principles</b>	<b>Examples</b>	<b>Additional Considerations</b>
<ul style="list-style-type: none"> <li>• Projects should focus on identifying interventions or initiatives relevant to APs and evaluation their impact on patient outcomes and experiences</li> </ul>	<p>Areas of emphasis for quality improvement may include:</p> <ul style="list-style-type: none"> <li>• Patient safety</li> <li>• Care coordination</li> <li>• Symptom management</li> <li>• Supportive care</li> <li>• Patient satisfaction</li> </ul>	<ul style="list-style-type: none"> <li>• Provide a detailed description of methods and strategies used to assess and improve quality of care, such as: <ul style="list-style-type: none"> <li>○ Data collection methods</li> <li>○ Interventions implemented</li> <li>○ Guidelines or protocols followed</li> </ul> </li> <li>• Consider which Quality Improvement methodology is most appropriate for the project (e.g., Lean, PDSA, Six Sigma)</li> <li>• Highlight how the project aligns with established quality improvement frameworks or evidence-based practices in oncology</li> <li>• Include evaluation of the impact of the QI project, such as: <ul style="list-style-type: none"> <li>○ Data on improvements in patient outcomes, AP adherence to best practices, or changes in patient satisfaction scores</li> </ul> </li> <li>• Discuss implications of quality improvement project for oncology practice, including lessons learned, recommendations for future projects, and strategies for sustaining and spreading successful interventions</li> <li>• Highlight how the project contributes to the overall improvement of care and outcomes for individuals with cancer</li> </ul>

## Additional Instructions and Information Regarding Abstract Submission

### Abstract Title

The title at the time of submission will be the final title used in all references to the abstract, including the poster, poster listings, and publication in the *Journal of the Advanced Practitioner in Oncology* (JADPRO) should the abstract be accepted. **Acronyms and brand names of drugs are not permitted in the title. Names of institutions in abstract titles are strongly discouraged.** The title is not included in the word count.

### Abstract Body and Word Count

Abstracts should be no more than 500 words, including section headings. Acronyms may be used within the abstract after the words are spelled out at first use, with the acronym following in parentheses. **Unless essential for context, please refrain from using identifying institution names in the body of the abstract, due to the blind review process.** Instead, use institution descriptors (e.g., large academic institution, community oncology practice, clinical research organization).

### Section Headings

**The abstract must be organized with section headings.** Section headings are included in the word count.

Example section headings:

- Background (*other options: Context, Setting, Objective, Purpose*)
- Methods (*other options: Intervention, Approaches, Procedures, Processes*)
- Results (*other options: Findings, Outcome Measures, Effects, Discoveries*)
- Conclusions (*other options: Interpretation, Summary, Evaluation*)
- Recommendations (*other options: Implications, Proposals, Applications*)

Background, Methods, Results, Conclusions and Recommendations are common section headings for abstracts and your abstract will be reviewed based on this type of structure (see review criteria below). The other options in parentheses are examples of other words you might use for section headings. Select section headings that best describe your content and its context.

### Tables

Tables are not allowed within the body of an abstract but may be used on posters to describe your content.

### Mention of Therapeutics

Generic names may be used for drug mentions in abstracts and abstract titles. A brand name may be added in parentheses after the generic name, at first use only, in the body of the abstract but not in the abstract title.

### References and Permissions

References and/or permissions should be uploaded as separate documents and therefore will not be included in the word count. Please be prepared to upload as a PDF.

### Regarding Artificial Intelligence (AI)

AI-based tools and technologies include but are not limited to large language models, generative AI, and chatbots. JADPRO Live, following the standards of the *Journal of the Advanced Practitioner in Oncology* (JADPRO), has adapted guidelines regarding AI in abstract submission and poster presentation.

- Human authors must be heavily involved in the writing process and are ultimately accountable for the content of the work.
- AI and AI-assisted technologies should not be listed as an author or co-author or be cited as an author.
- AI tools used to assist with grammar, spelling, formatting, and reference clean up do not need to be disclosed.
- JADPRO Live does not accept abstracts focused on author opinion or perspective that have used AI to generate text.
- Where authors use AI in research such as data acquisition or analysis, it must be disclosed in the Methods section, with the version number, data accessed, and manufacturer name described, along with the disclosure.
- Where authors use AI to create graphics for posters, the role of AI in creating the graphic must be specified in the legend.
- Reviewers of abstracts may not use AI tools when reviewing work for peer review.

Abstract submitters are asked to attest to authorship within the submission process. If AI has been utilized for abstract development beyond grammar, spelling formatting, and/or reference clean-up must upload a document (PDF) in the supporting document upload task disclosing the use of AI and providing a description.

### Projects in Progress and Late-Breaking Data

Abstracts eligible for review should describe completed work. Projects in progress may be considered for review if initial outcomes provide compelling information impacting advanced practice in oncology or hematology. Late-breaking data past the submission deadline may be verbally described by the poster presenter during the moderated poster presentation or the provided audio/video file opportunity should the abstract be accepted. Please contact the abstract coordinator for questions or concerns.

#### Abstract Authors

A maximum of 10 authors is allowed. The submitting author may be contacted to clarify co-author information, role, or contributions. All correspondence regarding a submitted abstract will be directed to the submitting author. Once the deadline has passed, changes to the abstract submission, including authorship, are not permitted. If there are questions regarding author inclusions, please contact the abstract coordinator before the abstract deadline. **Abstracts may not be written or submitted by parties on behalf of authors; submissions of this type will be declined.**

#### APSHO Membership

An advanced practitioner who submits an abstract must be a current member of APSHO in good standing and have a completed member profile. For more information regarding your current membership status or to join APSHO, please visit [www.aphso.org](http://www.aphso.org).

#### Important Tips for Successful Abstract Submission and Review

- Submit early and allow time for co-authors to complete their digital tasks.
- Refrain from mentioning institutions and other identifying information in the body of the abstract. Use descriptive phrases for your institution instead, for the purposes of blind review.
- Learn more about how abstracts will be reviewed. Read and note the criteria in the review process below.
- Recruit a seasoned colleague to read and critique your abstract before submission.
- Ask questions! Contact the abstract coordinator listed below.
- Be sure to hit the final submit button once all abstract information is entered and tasks are completed.
- Understand what is required once an abstract is accepted. Read the information on the posters below.

#### **Review Process**

All completed abstract submissions that meet requirements will undergo review, including review by two or more peer reviewers utilizing a double-blind review process, via the electronic submission system. (Authors and peer reviewers will remain unknown to each other.) The submitting author may contact the abstract coordinator for questions throughout the process. The abstract coordinator may contact submitting authors with questions regarding abstract submissions.

#### **Abstract Peer Review Criteria**

Abstracts are scored with a focus on the following key criteria:

Category	Key Considerations
Background	The background is clearly summarized; purpose and significance are clearly defined

<b>Methods</b>	Implementation methods are clearly described and evaluated according to specific measures, either qualitative or quantitative; methods clearly address the stated purpose/objective
<b>Results</b>	Presented results are consistent with the measures outlined in the methods section and address the stated purpose of the abstract
<b>Conclusions/Recommendations</b>	Outcomes and findings are clearly summarized; conclusions address how the results relate to the stated purpose/objective of the abstract
<b>Quality of Writing</b>	Abstract is well organized, descriptive, and easy to understand with a clear take home message; abstract is free of grammatical, spelling, and punctuation errors
<b>Relevance</b>	Abstract is relevant to AP practice
<b>Innovation</b>	The research, clinical/evidence-based practice project or advanced practice initiative is innovative for the setting in which it was developed

Peer reviewers provide recommendations during abstract review. The review chair confirms all final outcomes of acceptance or decline. All correspondence will be directed to the submitting author, including notification of review outcomes, whether accepted or declined.

### ***Accepted Abstracts***

Accepted abstracts will be eligible for poster presentation during JADPRO Live, November 14-17, 2024, at the Gaylord Texan in Grapevine, Texas. For more information regarding JADPRO Live and to access the abstract submission portal, please visit the [JADPRO Live conference website](#).

Accepted abstracts will be published in an issue of the *Journal of the Advanced Practitioner in Oncology* (JADPRO) following the conference. Publication of the abstract will not jeopardize future submission of a manuscript; authors are encouraged to continue their work to manuscript submission. In addition, abstracts and the e-poster gallery will be shared via email to a broad distribution list in the first quarter of 2025.

### ***Poster Presentations***

Submitting authors whose abstracts are accepted for poster presentation will be contacted by the abstract coordinator with additional details and next steps in the process, including, but not limited to, poster numbers or other identifiers, specifications for poster development, presenter tasks, presentation dates and times, and any additional requirements for final approval.

The presenting author will have tasks with deadlines in the poster portal, such as:

- ☐ Confirming the author profile information
- ☐ Uploading an author photo
- ☐ Uploading an author bio
- ☐ Uploading the final poster as a one-page image
- ☐ Providing the JADPRO Live conference registration confirmation number
- ☐ Recording a short audio or video statement about the poster

The submitting author of an accepted abstract will be invited to present a clinical poster at the conference and must be a registered and paid conference attendee to present. Information regarding moderated poster sessions and the new oral presentation session will be provided. **The poster presenter must attend the moderated poster sessions for in-person discussion of the poster with conference attendees. Poster**

**presenters selected for the oral session will be asked to submit 3-5 slides as an overview of the poster and must attend the oral session.** Additional information will be provided. Please contact the abstract coordinator if there are questions regarding the presenting author's role.

Accepted abstracts, poster PDFs, and presenting author information will be available to registered conference attendees digitally. Posters will be available via an e-poster gallery during the in-person conference and the virtual on-demand period November 20 through December 31, 2024.

### ***Outstanding Poster Award***

The annual APSHO *Outstanding Poster Award* will be presented during JADPRO Live. The review task force will use the same abstract peer review criteria (see review categories above) to consider all clinical posters submitted by the poster upload deadline and will select the *Outstanding Poster Award* winner. The poster award winner will be presented with a poster ribbon, receive special recognition during JADPRO Live, in an issue of the *Journal of the Advanced Practitioner in Oncology* (JADPRO) following the conference, in the *APSHO Advance* member newsletter, and via APSHO and JADPRO social media.

**To be eligible for the award, the final one-page PDF of the poster for the accepted abstract must be uploaded to the electronic submission system by 5 pm ET on October 23, 2024.**

### ***Accessing the Abstract Submission System***

Submitting authors may access the abstract submission system by clicking on the abstracts tab of the [JADPRO Live website](#). After reading the guidelines, the submitting author should click on "Create Account" under the New Users area to create an account for the submission system. Once the account is created, the submitting author will be able to access the abstract until the submission deadline. Submissions that are incomplete after the deadline will no longer be accessible.

**These detailed submission guidelines are also available for download within the submission system.**

For questions or concerns regarding abstracts and posters for JADPRO Live, please contact the abstract coordinator, Kelley Moore, [kelly.moore@broadcastmed.com](mailto:kelly.moore@broadcastmed.com).