The ACLM Annual Conference, to be held November 16 – 19, 2025 in Grapevine, TX, is an inclusive opportunity for all current and future ACLM members in the medical industry to engage in exceptional formal and informal learning experiences that help to advance career and professional development, individual productivity, and organizational effectiveness.

These guidelines outline the details for preparation and submission of research abstracts for potential conference presentations as posters or brief oral presentations. Please, use the following guidelines to ensure a complete and appropriate submission.

Authors are encouraged to submit abstracts for a poster presentation in all major areas of lifestyle medicine. We define lifestyle medicine as, "…the use of evidence-based lifestyle therapeutic intervention—including a whole-food, plant- predominant eating pattern, regular physical activity, restorative sleep, stress management, avoidance of risky substances, and positive social connection—as a primary modality, delivered by clinicians trained and certified in this specialty, to prevent, treat, and often reverse chronic disease."

Abstracts must be submitted by 11:59pm EST, April 4, 2025. Authors will be notified by May 30, 2025.

Late or incomplete submissions will be ineligible for review.

If accepted, materials must be uploaded no later than Friday, October 17, 2025 for review.

- All acceptance and approval of abstracts is conducted by the ACLM Research Committee Reviewer Panel.
- Abstracts must be received through the online portal by April 4, 2025, at 11:59 pm EST.
- Faxed, emailed, or mailed abstract submissions will not be accepted.
- You are permitted to submit only one abstract as the first author, but you may co-author multiple other abstracts.
- Multiple abstract submissions detailing the same study results are not permitted.
- Abstracts must contain results that pertain to the abstract's objective(s). "Results will be presented at
- LM2025" will not be accepted.
- All authors must approve the abstract before submission.
- If the submitting author is a professional, evidence reviews are not accepted. Only Trainees are allowed to submit evidence reviews.
- The abstract must not have been published as an abstract or full paper in a scientific, medical, or professional publication at the time of submission, or presented previously at another conference.
- Submitting authors must review and accept the use of ACLM Citation Standards.
- Abstracts must adhere to ACCME's Standards for Competing Interests, and submitting authors must reviewand
- accept the use of ACCME Standards for Competing Interests.
- You must identify any affiliations or financial interests, on your abstract, of any commercial entities that can have a bearing on the subject matter of your abstract.
- Abstracts in Original Research must have been reviewed by an IRB and determined to be either approved or exempted. You will be asked to upload documentation from the IRB that reviewed your project when you submit. That could be a determination that IRB oversight is not needed, a determination that research is not

human subjects research, an exemption letter, or an accepted protocol.

- Abstracts in Clinical Vignettes / Case Reports attest to having the patient's written permission to present their data, and all data must be deidentified. You will be asked for confirmation that your patient has given permission for their information to be used in a case report when you submit.
- Case Reports may not be autobiographical.
- To present your abstract at the conference, the presenting author must be registered for the conference. If your conference registration is not received by the conference registration deadline, any accepted abstracts will be removed and authors will be unable to present.

Required for Submission:

A proposal must have a short, specific presentation title (containing no abbreviations that indicates the nature of the presentation. Please use Title Case.

Please choose "Abstract Submission"

Please select an overall track for your submission.

- Applications of Lifestyle Medicine Track
- Current Issues in Healthcare Track
- Healthcare Transformation Through Lifestyle Medicine Track
- Interprofessional Lifestyle Medicine Track

The author who is submitting the abstract will automatically will receive all communications related to tasks to be completed. All authors will receive emails reminding them to coordinate with the submitting author. The submitting author will automatically be placed first in the order of authorship, but this can be changed when submitting. The submitting author will need to designate which co-author will be presenting the abstract in-person at the conference. If necessary, it will be possible to change which author is designated as the presenting author after acceptance.

- Please note the two author categories below: Professional (Any practicing professional not suitable for other categories)
- Trainee (ACLM Members which include residents, fellows and students)

Please be prepared to input your name, email address, professional affiliation and affiliation mailing address, administrative assistant (if applicable), and short biography.
If the authors are requesting that their abstract be considered for a brief oral presentation, as opposed to just a poster, all authors are required to submit a CV and CME Disclosure form. Without these documents, abstracts **will not be considered** for brief oral presentations because of CME requirements.

You will also be asked to categorize your abstract under one of the following presentation topics:

- Nutrition
- Physical Activity
- Sleep Stress Management
- Avoidance of Risky Substances
- Positive Social Connections
- Education
- Business/billing/reimbursement
- Other

You will be asked to designate your abstract as one of the following presentation types:

- **Original Research** (prospective intervention trials with one or more arms, observational studies, case-control studies, cross-sectional surveys, retrospective analyses etc.)
- **Clinical Vignette / Case Report** (discussion of a single patient's or several patients' case history and key lessons/implications for Lifestyle Medicine practice)
- **Developments in Clinical Practice** (presentation of new protocols, clinical procedures, or programs that advance the practice of Lifestyle Medicine)
- ****Evidence Review** (presentation of scientific and clinical evidence on a particular topic)

** Only Trainees are permitted to submit abstract within the Evidence Review type.

You will be asked to designate your abstract as one of the following presentation formats:

- **Oral Abstract Presentation** - Abstracts submitted as potential oral presentations will be considered for a 15-minute time slot to present a talk at the conference. All accepted abstracts that are not selected for oral presentations will be designated as poster presentations. Evidence Reviews are not eligible for oral presentations.
- **Poster Presentation Only** - General review process for conference acceptance; accepted abstracts will be presented as posters.

Please complete each section carefully. Incomplete or insufficiently completed abstracts will not be reviewed. All abstracts must be written in English. Please **see instructions below for specific guidelines on how each section may differ** by presentation type.

- **Background** – limit of 50 words
- **Objective(s)** – limit of 40 words
- **Methods** – limit of 200 words
- **Results** – limit of 250 words
- **Conclusion** – limit of 50 words
- **Funding** – limit of 400 words
- **Conflicts of interest of all authors** – limit of 400 words

ORIGINAL RESEARCH

- **Background**: The Background should briefly provide the context and significance for the project, including identifying previous gaps in research or clinical practice as well as the objective(s) of the project (Limit of 50 words)
- **Objective(s)**: The Objective(s) should state aim or research question of the original research abstract. The results should fulfill the Objective(s). (Limit of 40 words)
- **Methods**: Methods should be succinct and clear, and specify the process followed so the reader understands how the results were obtained. Be sure to identify by name the statistical tests used to generate the data presented in the results, such as p-values. (Limit of 200 words)
- **Results**: Results should be presented completely and simply and should correspond to the methods used. Do not editorialize in the results section. Statistical results must be presented quantitatively. Do not make qualitative descriptive statements when referring to numerical data without stating the statistical results (such as, "the plant-based dietary group reduced their risk more than the control group" or "lack of sleep was associated with poor diet", or "a greater number of participants preferred group medical visits over one-on-one visits"). When presenting statistical results, include the point estimate, 95% Confidence Interval, and associated p-value. Do

not present p-values unattached to other data (such as, “associations were significant at $p < .05$”). (Limit of 250 words)

- **Conclusion**: The Conclusion should interpret and summarize the significance of the results and propose directions for future research as well as identify relevance for clinical practice and/or public health. (Limit of 50 words)

CLINICAL VIGNETTE / CASE REPORT

- **Background**: The Background should describe the context of the case and explain the significance and importance. (Limit of 50 words)
- **Objective(s)**: The Objective(s) should state aim or research question of the case abstract. The results should fulfill the Objective(s). (Limit of 40 words)
- **Methods:** The Methods should describe chronologically the treatment history, physical examination, and investigative studies of the patient. No identifying information should be used. (Limit of 200 words)
- **Results:** The Results should describe the patient's progress and outcome, review the justification and relative success of clinical decisions and extract the lessons learned from the case. (Be careful of stating this case is the “first” to demonstrate a particular phenomenon as even very thorough literature searches often fail to identify all examples of case reports.) (Limit of 250 words)
- **Conclusion:** The Conclusion should summarize the lessons learned relating to the field of Lifestyle Medicine and/or general medical practice. (Limit of 50 words)

DEVELOPMENTS IN CLINICAL PRACTICE

- **Background**: The Background should briefly provide the context and significance for the project, including identifying previous gaps in clinical practice. (Limit of 50 words)
- **Objective(s**): The Objective(s) should state project or clinical goals of the developments in clinical practice abstract. The results should fulfill the Objective(s). (Limit of 40 words)
- **Methods**: Methods should be succinct and clear, and specify the process followed in developing, testing, or executing the protocol, clinical procedure, or program. (Limit of 200 words)
- **Results**: Results should be presented completely and simply and should summarize both the strengths and limitations of the project in terms of relevant outcomes (this may include patient health outcomes, patient engagement, experience of providers/staff, financial sustainability, logistical feasibility or scalability, or others). (Limit of 250 words)
- **Conclusion**: The Conclusion should interpret and summarize the significance of the results and propose directions for future research or clinical practice. (Limit of 50 words)

EVIDENCE REVIEW

- **Background**: The Background should briefly provide the context and significance for conducting the review, including identifying previous gaps in research or clinical practice. (Limit of 50 words)
- **Objective(s)**: The Objective(s) should state aim or research question of the evidence review abstract. The results should fulfill the Objective(s). (Limit of 40 words)
- **Methods**: Methods should be succinct and clear and describe the search strategy used to search the literature. (Limit of 200 words)
- **Results**: Results should be presented completely and simply and should present the data relevant to the practice of Lifestyle Medicine. (Limit of 250 words)
- **Conclusion**: The Conclusion should interpret and summarize the significance of the results and propose directions for future research or clinical practice. (Limit of 50 words)

ALL ABSTRACTS

- **Funding**: Report the source of any funding received for the research. If no funding was received, please put "N/A". (Limit of 400 words)
- **Conflicts of Interest**: Any conflicts of interest, including affiliations and/or financial interests that have a bearing on the subject matter of your abstract must be reported. If there are none, put "The authors report no conflicts of interest related to this research." Please review ACCME's Standards for Competing Interests for clarification. ACCME Standards for Competing Interests. (Limit of 400 words)

EVALUATION

Each abstract will be reviewed by multiple reviewers. Those selected for a poster or oral presentation at the conference will be chosen based on merit. Abstracts that can easily be accepted with have the following the qualities:

- The abstract meets all rules of submission
- The abstract is properly and fully prepared
- The abstract is concise and clear, with no English-language, grammatical, or spelling errors
- The abstract text corresponds to the structured abstract headings for the presentation type and the content is appropriate for the heading
- The abstract narrates a logical story. The Background introduces the gap and needs. The Objective(s) should frame what the project is designed to accomplish, the Methods describe how you achieved this, and the Results state what you found to fulfill the Objectives. The Conclusion discusses what this means and why it's important.
- The content will contribute to achieving the overall Lifestyle Medicine conference goals and is relevant to the professional practice of other attendees
- The abstract exhibits mastery of the subject

If the submitting author designated the abstract submission to be considered for an oral presentation, the abstract may be selected for a 15-minute presentation to be given at the conference. Submitting authors will be notified of their designation at the same time as notification of acceptance.

Evidence reviews are not eligible for oral presentations. Oral presenters should plan for approximately 10-12 minutes of speaking followed by 3-4 minutes of questions.

Oral presenters will prepare a slide presentation only; oral presenters will not upload a poster.

Outstanding poster presentations will be recognized at the conference. First authors of the abstracts selected for the conference are eligible to receive the recognition. Abstracts selected for oral presentations are not eligible to receive poster awards.