

Student Club Poster Submission Information

INSTRUCTIONS FOR SUBMITTING YOUR POSTER ABSTRACT

Before you begin your submission, determine the correct format (Case Study or Scientific) for your study.

Format Definitions

- [Case Study format](#) refers to the collection and presentation of detailed information about a particular participant or small group, frequently including the accounts of subjects themselves. A form of qualitative descriptive research, the case study looks intensely at an individual or small participant pool, drawing conclusions only about that participant or group and only in that specific context. Researchers do not focus on the discovery of a universal, generalizable truth, nor do they typically look for cause-effect relationships; instead, emphasis is placed on exploration and description. (See example abstract on page 5 and example PDF on page 7.)

A **case series** is a group of case reports. It is preferred to use the scientific format in this situation if a conclusion about the subject is made by the author(s).

A **Case Study/Series** is required to indicate follow-up length. The follow-up length needs to be at least 12 months prior to submission. In a case series, a mean follow-up length of more than 12 months does not itself qualify unless all patients had more than 12 months of follow-up.

- [Scientific format](#) refers to the study/evaluation of a question and formation of a hypothesis and the development of methodology directed to addressing the hypothesis; it could be prospective or retrospective. It involves gathering information, testing the hypothesis, interpretation of the data and drawing conclusions that validate or negate the hypothesis. Systematic or **traditional Literature Reviews without quantitative synthesis are NOT accepted**. (See example abstract on page 8 and example of PDF on page 10.)
- [Systematic Review with Meta-analysis format](#) refers to a review of the current scientific evidence related to a specific question or topic. Clear and reproducible methods are used to identify pertinent studies, extract/synthesize relevant data, and provide a summary/conclusion for the topic in question.
 - [PRISMA Statement](#)
 - [PRISMA Elaboration and Explanation](#)
 - [PRISMA Abstract Checklist](#)
- **Only one (1) poster is accepted from each ACFAS Student Club. Faculty members may not be listed as authors or co-authors of a Student Club Poster.**

Abbreviations may be used (Index Medicus). First spell out the terminology in full, followed by the abbreviation in parentheses. Thereafter, abbreviations only may be used.

Maximum number of words:

- 250 - Initial abstract submission
- 850 – PDF (final poster to be presented)
- Submit your abstract at acfas.org

Important! *Before you begin your submission, carefully review the following policies and instructions.*

Failure to adhere to the Guidelines will result in your poster submission being disqualified.

Policies Governing Poster Submissions – The Do’s and Don’ts

| Do’s | Don’ts (<i>may result in decline/disqualification</i>) |
|--|--|
| Submit original research (<i>not previously published OR displayed elsewhere prior to the ACFAS Annual Meeting</i>). | Submit a Literature Review (see page 3 for details) |
| Submit completed studies only. | Submit the same topic for oral presentation (manuscript/abstract) also as a poster. |
| Include “Level of Evidence” in the online submission. | Use any commercial terminology. (<i>company/product name</i>) |
| Complete Financial Disclosure – Financial Conflict/Duality of Interest Disclosure. | Display any logos on the poster other than the name of Student Club |
| Must register at least one of the poster authors to attend the Annual Conference to participate and have poster displayed. | Make any title or author changes prior to uploading PDF poster (Research changes are not permitted after abstract submission.) |

The ACFAS reserves the right to remove from the exhibit hall any poster displaying any commercial terminology, e.g. company/product names, logos other than the names of hospital/practice, residency, or school.

Levels of Evidence for Primary Research Question

| Types of Studies | | | | |
|--|---|--|--|--|
| | Therapeutic Studies-- Investigating the Results of Treatment | Prognostic Studies-- Investigating the Effect of a Patient Characteristic on the Outcome of Disease | Diagnostic Studies-- Investigating a Diagnostic Test | Economic and Decision Analyses-- Developing an Economic or Decision Model |
| Level 1 | <ul style="list-style-type: none"> High-quality randomized controlled trial with statistically significant difference or no statistically significant difference but narrow confidence intervals Systematic review² of Level-1 randomized controlled trials (studies were homogeneous) | <ul style="list-style-type: none"> High-quality prospective study⁴ (all patients were enrolled at the same point in their disease with ≥80% follow-up of enrolled patients) Systematic review² of Level-1 studies | <ul style="list-style-type: none"> Testing of previously developed diagnostic criteria in series of consecutive patients (with universally applied reference “gold” standard) Systematic review² of Level-1 studies | <ul style="list-style-type: none"> Sensible costs and alternatives; values obtained from many studies; multiway sensitivity analyses Systematic review² of Level-1 studies |
| Level 2 | <ul style="list-style-type: none"> Lesser-quality randomized controlled trial (e.g. <80% follow-up, no blinding, or improper randomization) Prospective⁴ comparative study⁵ Systematic review² of Level-2 studies or Level-1 studies with inconsistent results | <ul style="list-style-type: none"> Retrospective⁶ study Untreated controls from a randomized controlled trial Lesser-quality prospective study (e.g., patients enrolled at different points in their disease or <80% follow-up) Systematic review² of Level-2 studies | <ul style="list-style-type: none"> Development of diagnostic criteria on basis of consecutive patients (with universally applied reference “gold” standard) Systematic review² of Level-2 studies | <ul style="list-style-type: none"> Sensible costs and alternatives; values obtained from limited studies; multiway sensitivity analyses Systematic review² of Level-2 studies |
| Level 3 | <ul style="list-style-type: none"> Case-control study⁷ Retrospective⁶ comparative study⁵ Systematic review² of Level-3 studies | <ul style="list-style-type: none"> Case-control study⁷ | <ul style="list-style-type: none"> Study of nonconsecutive patients (without consistently applied reference “gold” standard) Systematic review² of Level-3 studies | <ul style="list-style-type: none"> Analyses based on limited alternatives and costs; poor estimates Systematic review² of Level-3 studies |
| Level 4 | Case series ⁸ | Case series | <ul style="list-style-type: none"> Case-control study Poor reference standard | <ul style="list-style-type: none"> No sensitivity analyses |
| Level 5 | Expert opinion | Expert opinion | Expert opinion | Expert opinion |
| <ol style="list-style-type: none"> A complete assessment of the quality of individual studies requires critical appraisal of all aspects of the study design. A combination of results from two or more prior studies. | | | | |

3. Studies provided consistent results.
4. Study was started before the first patient enrolled.
5. Patients treated one way (e.g., with arthrodesis) compared with patients treated another way (e.g., with arthroplasty) at the same institution.
6. Study was started after the first patient enrolled.
7. Patients identified for the study on the basis of their outcome (e.g., failed arthrodesis), called “cases”, are compared with those who did not have the outcome (e.g., had a successful arthrodesis), called “controls”.
8. Patients treated one way with no comparison group of patients treated another way.

This chart was adapted from material published by the Centre for Evidence-Based Medicine, Oxford, UK. For more information, please see www.cebm.net.



PRISMA 2020 for Abstracts Checklist

| Section and Topic | Item # | Checklist item | Reported (Yes/No) |
|-------------------------|--------|---|-------------------|
| TITLE | | | |
| Title | 1 | Identify the report as a systematic review. | |
| BACKGROUND | | | |
| Objectives | 2 | Provide an explicit statement of the main objective(s) or question(s) the review addresses. | |
| METHODS | | | |
| Eligibility criteria | 3 | Specify the inclusion and exclusion criteria for the review. | |
| Information sources | 4 | Specify the information sources (e.g. databases, registers) used to identify studies and the date when each was last searched. | |
| Risk of bias | 5 | Specify the methods used to assess risk of bias in the included studies. | |
| Synthesis of results | 6 | Specify the methods used to present and synthesise results. | |
| RESULTS | | | |
| Included studies | 7 | Give the total number of included studies and participants and summarise relevant characteristics of studies. | |
| Synthesis of results | 8 | Present results for main outcomes, preferably indicating the number of included studies and participants for each. If meta-analysis was done, report the summary estimate and confidence/credible interval. If comparing groups, indicate the direction of the effect (i.e. which group is favoured). | |
| DISCUSSION | | | |
| Limitations of evidence | 9 | Provide a brief summary of the limitations of the evidence included in the review (e.g. study risk of bias, inconsistency and imprecision). | |
| Interpretation | 10 | Provide a general interpretation of the results and important implications. | |
| OTHER | | | |
| Funding | 11 | Specify the primary source of funding for the review. | |
| Registration | 12 | Provide the register name and registration number. | |

From: Page MJ, McKenzie JE, Bossuyt PM, Boutron I, Hoffmann TC, Mulrow CD, et al. The PRISMA 2020 statement: an updated guideline for reporting systematic reviews. BMJ 2021;372:n71. doi: 10.1136/bmj.n71

For more information, visit: <http://www.prisma-statement.org/>