

Attention Medical Students, Residents, and APPs: We are Announcing a Call for Abstracts!

Society of Hospital Medicine – RIV Competition – **SHM Florida Chapter's Summit 2021** (North Florida, Southeast Florida, Southwest Florida, Tampa Bay Area) – Research, Innovation and Clinical Vignette Virtual Competition

FL Summit Date: Saturday, April 17, 2021

Cost: Free

Abstract Deadline (first round): Monday, March 8, 2021

Notification of abstract acceptances for the next round and instructions for digital posters: Wednesday, March 17, 2021

Deadlines for Digital Posters (second round): Thursday, April 1, 2021

Notification of Finalists: Friday April 9, 2021

**6 finalists will be selected to give oral presentations during the SHM Florida Chapter's Summit on April 17th **

Abstract Submissions: Send abstracts meeting the criteria below to:

Matthew.Calestino@hcahealthcare.com

Award for overall winners: The winners will receive automatic acceptance into the SHM's National Competition in 2022 as well as a cash prize. In order to be accepted, the winners are required to submit their abstracts into the national submission site before the deadline in the fall.

For all participants: Encouragement to submit to SHM national competition for academic pursuit.



Type of Category Submissions

Examples of abstract submissions from 2020 SHM National Meeting can be found here.

Research

Submissions can report clinical research, basic science research, or a systematic review of a clinical problem. Research abstracts concerned with the highlighted topic areas above, as well as efficiency, cost, or method of health care delivery methods and medical decision-making are also encouraged. Click for an example.

Abstracts submitted for the Research category should adhere to the following headings:

- Background
- > Methods
- > Results
- Conclusions (Do not use phrases such as "The results will be discussed.")

Innovations

Authors who wish to describe an innovative program in hospital medicine are encouraged to submit to this category. Innovations will primarily be descriptive, but they may also include preliminary data. A more rigorous evaluation of an innovative program should be submitted as a research abstract rather than as an innovation. For example, an innovation may describe a novel strategy for disseminating practice guidelines, whereas a research abstract may analyze its impact on length of stay. Please note that all innovations submissions must report on an activity that has already been piloted or fully implemented in the healthcare setting. Ideas for innovations that are being planned but have not yet been implemented will not be reviewed.

Any type of innovation may be submitted, including (but not limited to) critical pathway development and dissemination, medical education, faculty development, handheld computers, computerized medical records, billing and collections, patient safety interventions, communications, and teamwork with other care team members. For example, a description of a unique patient safety issue, the associated interventions, and root cause analysis resulting in systems-based modifications would be an innovation of interest to others in the field of hospital medicine.

Abstracts submitted for the Innovations category should adhere to these headings:

- Background
- > Purpose



- Description
- ➢ Conclusions

Clinical Vignettes

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, highlights an area of clinical controversy in hospital medicine, or illustrates a unique patient safety issue. It may include a summary of pertinent patient history, physical findings, laboratory data, or management description. It should be clear from the discussion portion of the abstract why the vignette is most appropriate for a hospital medicine (versus general internal medicine) competition. Clinical vignettes will be judged on originality, organization, writing ability, and relevance to hospital medicine.

Abstracts submitted for the Clinical Vignette category should adhere to these headings:

- Case presentation
- Discussion
- Conclusions

INSTRUCTIONS ON ABSTRACT SUBMISSION

Abstracts will be submitted by email using a word document using .doc or docx format. No macros are allowed. Please include all tables and figures in one document. Name the file: LastName.FirstName, for example: Doe.John.doc

Within the body of the email, please also include the following information:

- Type of Submission (Research, Innovation or Clinical Vignette)
- Abstract Title
- For the first author, please include:
 - Email
 - Phone number
- For each author, include:
 - Author name
 - Degree
 - Institution
 - Department
 - Section
 - Training Level



- National SHM Member Status (Y/N)
- Disclosures of any conflict of interest

Receipt of an abstract by email will also communicate your agreement to adhere to the author responsibilities as dictated in this document

The abstract limit is 3,000 characters including spaces.

Tables and graphics: Please keep in mind that each table and graph will count as 200 characters and will contribute to the total character count. **No more than 2 tables or graphics** will be accepted.

- A graphic is to be submitted using either.jpg, .jpeg, or .gif format., then attached to the word document.
- A graphic may appear large on screen, but will be adapted for publication. Graphics that are poor resolution or unclear may be removed from abstracts that are accepted for publication.

Style: Write for clarity and directness. It is NOT acceptable to state that "the results will be discussed." Avoid the use of medical jargon or stock empty phrases.

Abbreviations, Symbols, and Nomenclature: Usage should conform as closely as possible to that recommended in the CBE Style Manual (6th 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 propriety name may be given only with the first use of the generic name.

Units of Measurement: Metric (SI), including those for height, length, mass (weight), and body temperature should be used. Measurements for substances of known, pure composition should be in millimoles/milliliter or millimoles/liter. For mixtures of substances where exact composition is not known, use grams/liter.

IRB or other research approval: If human or animal species were exposed to risks not required by their medical needs during the study included in the abstract, the author affirms that the study was approved by an appropriate committee. If no such committee was available and informed consent was needed, the author affirms that approval was obtained in accordance with the principles set forth in "The Institutional Guide to DHEW Policy on Protection of Human Subjects" and the "Guide for the Care and Use of Laboratory Animals," published by the NIH.

Proofread abstracts carefully to avoid errors before they are submitted. This includes typographical errors. If selected, abstracts may be published in print and electronic versions



exactly as submitted. Submit high resolution tables and graphics since poor quality images will be difficult to read in print and electronic versions.

Abstract Selection and Poster Information

Abstracts will be blindly scored by a panel of judges from each of the chapters. The judges may decide to reassign your abstract to another category.

Authors of selected abstracts will be notified on **Wednesday, March 17th** and invited to create a digital poster to compete in the 2nd round of the competition. Instructions for digital posters will be provided within this email.

Electronic posters will need to be submitted by **Thursday, April 1st** to be eligible as a finalist. Notification of the 6 Finalists will be sent out on **Friday April 9th.** Finalists will present virtually at the Florida Summit on **Saturday, April 17th**. The overall winners will be announced during this event.

Acceptance/Withdrawal of Your Abstract

Finalists will have until Monday, April 12th to accept the invitation to present orally during the Florida Summit on April 17th. Your acceptance will be considered a commitment to prepare a poster and attend the meeting. After accepting, if you find that you are no longer able to prepare a poster or attend the meeting, this must be communicated to the chapter leadership by email.

Presenting Author's Availability: The presenting author (preferably the first author) must be available to attend the virtual Florida Summit on **Saturday, April 17th** if selected as a finalist.

Official Rules

Eligibility: The North Florida, Southeast Florida, Southwest Florida, Tampa Bay Area Chapters of SHM are accepting abstract submissions in three categories: **research**, **innovations**, **and clinical vignettes**. Abstracts are eligible for submission if they have not been published in a peer-reviewed journal prior to <u>December of the current year</u>. Submissions presented at SHM regional meetings or other organizations' meetings (e.g., SGIM, ACP) within the past year are eligible for submission unless they have been published in a peer-reviewed journal or journal supplement. Abstracts published in meeting proceedings or other materials that are not copyrighted are eligible for submission. It is the responsibility of the submitter to check on whether material is copyrighted. SHM and Wiley Blackwell do not prohibit authors from submitting their abstracts to other meetings following acceptance to the SHM annual meeting or require permission for the abstracts to be printed in other publications.

Author/Submitter Responsibility: There is no membership requirement to submit your abstract in this competition or present as a finalist. However, if the abstract is also submitted to and accepted at the SHM national meeting, the first author will need to become an SHM member in



good standing or become one prior to the meeting. Other authors need not be SHM members to be included on the abstract. However, if the first author appoints another person to present the poster or presentation at SHM's annual meeting, the presenter must be, or become, an SHM member prior to the meeting.

The first author is also responsible for adhering to the Conflict of Interest Policy, obtaining disclosure information from all coauthors, and ensuring that all coauthors meet the definition of authorship as stated by the International Committee of Medical Journal Editors. Only the first author will receive email communications regarding the abstract, and it is his/her responsibility to communicate any notifications with co-authors, to accept or decline the invitation to present the abstract, if applicable, and to withdraw the abstract, if applicable.

Statements of Disclosure

Conflict of Interest Policy: The North Florida, Southeast Florida, Southwest Florida, Tampa Bay Area Chapters of SHM promote improved inpatient care, teaching, and research in the field of hospital medicine. These chapters strive to ensure that these goals are met throughout its educational activities and academic competitions. All authors submitting abstracts to the Research, Innovations, and Clinical Vignette Competition are required to disclose any relationships with pharmaceutical companies, biomedical device manufacturers, or other organizations that could represent potential conflicts in their presentation. The submitting author is responsible for providing disclosure information for all co-authors. This requirement applies to currently existing relationships or relationships within the past year that relate to the abstract entry. The principal intent of this disclosure is not to prevent authors with a potential conflict from submitting an abstract or presenting their work. Rather, disclosure information will assist the chapter leadership in the review process.

Permissions

The author submitting this abstract acknowledges that he/she and all co-authors have seen and agree with the following: the contents of the abstract; responsibility for clinical trial data (if applicable); that the abstract has not been published in a peer-reviewed journal prior to December of the current year (prior presentation of the abstract at other meetings is allowed); disclosures of financial interest in or support from, or equity positions in, manufacturers of drugs, services, or products mentioned in the abstract; trial registry information. Finally, all authors and coauthors acknowledge understanding that plagiarism will not be tolerated and result in withdraw of the abstract at a thorough investigation that could result in prohibition from participation. Accepted abstracts to the national SHM meeting will appear in an online abstract supplement of the Journal of Hospital Medicine. Abstract authors are solely responsible for obtaining any applicable permission for using graphics or information included in their abstract. For guidelines, please see the Wiley Blackwell Permission Guidelines for Authors.



Questions?

Please contact <u>Matthew.Calestino@hcahealthcare.com</u> for questions regarding the local competition.